

2025 National Health Interview Survey (NHIS) Questionnaire
(Document Version: 25 March 2025)

Contents

1. Introduction

This National Health Interview Survey (NHIS) questionnaire report provides the questions administered to NHIS respondents in the order they were asked. It is organized hierarchically into these parts: Contents, Index, and NHIS questionnaire, which in turn includes the Roster, Adult and Child modules.

2. Section Index

A section index is provided for each of the three modules: Roster, Adult, and Child. The index can be navigated via the Bookmarks pane to quickly get information about the different sections in the module. The display pane lists information about each section in the module including the three-letter section name, the section description, the type of content in the section (annual core, rotating core, sponsored or emerging content) and the page range in this document for each section for ease of printing.

3. NHIS questionnaire: Roster, Adult and Child modules

The questionnaire is the main part of the report and provides detailed information about each question in the survey. The hierarchy in the Bookmarks pane has three levels: module (Roster, Adult, Child), sections within each module, and questions within each section represented by the variable name in the instrument. The sections and questions are listed in questionnaire order. Selecting a specific question in the Bookmarks pane will display a detailed report for that question in the display pane while selecting a section abbreviation will display the report for the first question in the section.

In the question text field of the report, text displayed in **bold and in blue font** is an interviewer instruction which is sometimes followed by optional text in *gray, italic font*.

Information provided for each question includes:

- Question ID: unique alphanumeric code for each question beginning with the 3-letter section abbreviation
- Variable: instrument variable name for the question
- Interview Module: module where the question is located: Roster, Adult, or Child
- Content Type: indicates whether the question is part of the Annual Core, Rotating Core, Sponsored Content or Emerging Content
- Question Text: question wording administered to respondent with indicators for fills; may also include interviewer instructions
- Fills: table of contextual text substitutions that are filled into the question text
- Response: table of possible responses to the question
- Universe: group of respondents who received the question
- Skip Instructions: instructions for moving to the next question in the questionnaire

Additional information may include:

- Hard Edit: prompt received when response entered is not allowed; response must be changed in order to proceed
- Soft Edit: prompt received when response entered is questionable; must follow instructions in order to proceed
- Replicate To: indicates family-level information obtained in the Sample Adult interview that is copied to a replicated variable in the Sample Child and vice versa for efficiency when the Sample Child and the Sample Adult are in the same family.
- ? [F1]: indicates that there are notes available to the field representative to answer respondents questions about the topic.

4. Questionnaire Glossary

Description of variables listed in the skip and fills instructions of some survey questions that are used for the programming the interview.

2025 National Health Interview Survey (NHIS) Questionnaire

Navigate the hierarchy in the Bookmarks pane to the module and section of interest. Selecting the module or section name will display the detail for the first variable for that module or section, respectively. Expanding the hierarchy further and selecting a question will display the detail for that specific question. The detailed report will show the following information for a question: Question ID, Variable, Content Type, Question Text, Fills, Response, Universe, Skip Instructions, and optionally, Hard Edit, Soft Edit and Replication.

2025 National Health Interview Survey (NHIS) Questionnaire

ROS: Roster

Question ID: ROS.0020.00.1 Variable: HHClock Interview Module: Roster Content Type: Annual Core

Question Text:

- * The demographic information is now locked and cannot be changed.
- * Enter '1' to continue with the interview.
- * If reentering the case, press the END key to go to the next unanswered question.

Fills:

Response:

1	Enter 1 to Continue

Universe:

HHC section has been locked.

Skip Instructions:

<1> If GEN.PCNTUNDER18 GT 0 [goto REL.WHOPAR]
else [goto SASCSELECTION]

2025 National Health Interview Survey (NHIS) Questionnaire

ROS: Roster

Question ID: ROS.0030.00.1 Variable: ROSTERCHECK Interview Module: Roster Content Type: Annual Core

Question Text:

* The roster will now be locked. If you are confident that it has been recorded accurately, enter 1 to continue. Otherwise go back and correct now.

Fills:

Response:

1	Enter 1 to Continue

Universe:

At least one person in the household is greater than 18 and there is at least one child in the household and at least one person's age is not guessed and not all household members in the armed forces and the HHC section has not been locked.

Skip Instructions:

```
<1> If GEN.PCNTUNDER18 GT 0, [goto tblREL.WHOPAR]
if SURVTYPE=T and eligible adults [goto SELECT_SA]
elseif SURVTYPE=T and eligible children [goto SELECT_SC]
else [goto SASCSELECTION]
```


2025 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0020.00.1 **Variable:** NAME_FNAME **Interview Module:** Roster **Content Type:** Annual Core

Question Text:

^FNAME

* Enter 999 if no more persons.

Fills:

FNAME	Description	NAME_FNAME Introduction
	Instruction	If first person in roster, fill: "Starting with you, what are the names of all the persons living or staying here?" Else for next person fill: "What is the name of the next person living or staying here?"

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

All persons

Skip Instructions:

```
<allow 20> if name on fake/false name list [goto ERR2_NAME_FNAME];
elseif NAME_FNAME is identical to any other NAME_FNAME or ALIAS [goto ERR3_NAME_FNAME]
else [goto NAME_LNAME]
<999> if PX=01 [goto ERR1_NAME_FNAME]
else [goto USUALRES]
<RF,DK> [goto ALIAS]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR1_NAME_FNAME	999 for first person hard edit	{check ERR1_NAME_FNAME} 999 not allowed for the first person in the household. Please correct.
ERR3_NAME_FNAME	Identical first name hard edit	{check ERR3_NAME_FNAME} First name cannot be the same as previous ^NameMatch.

Soft Edit:

Check Text	Check Description	Check Text
ERR2_NAME_FNAME	Fake name soft edit	{signal ERR2_NAME_FNAME} You are entering a possible fake/false name. Please correct. If this is a legitimate name, suppress this error message and continue. Otherwise, go back to the name field and enter a legitimate name. To enter an alias, enter 'Ctrl D' or 'Ctrl R' for 'Don't Know' or 'Refused' at the name field. Then, enter a matching identifier/alias at the next screen (ALIAS).

2025 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0030.00.1 Variable: NAME_LNAME Interview Module: Roster Content Type: Annual Core

Question Text:

* Enter last name if provided. Last name is optional.

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

A valid first name was entered

Skip Instructions:

<allow 20,RF,DK,empty> [If PX<25 goto NAME_FNAME for next person, else goto USUALRES]

2025 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0040.00.1 Variable: ALIAS Interview Module: Roster Content Type: Annual Core

Question Text:

How shall I refer to ^youthisperson for the rest of the interview?

Fills:

youthisperson	Description	you/this person
	Instruction	If subject=respondent, fill "you", else if subject NE respondent, fill "this person"

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Persons who don't know or refused to give first name.

Skip Instructions:

```
<allow 20> if ALIAS is identical to any other NAME_FNAME or ALIAS [goto ERR1_ALIAS]
elseif ALIAS = 999 [goto ERR2_ALIAS]
else [If PX<25 goto NAME_FNAME for next person, else goto USUALRES]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR1_ALIAS	Identical alias hard edit	{check ERR1_ALIAS} Alias cannot be the same as previous ^NameMatch.
ERR2_ALIAS	999 for alias hard edit	{check ERR2_ALIAS} *999 not allowed as an alias. *Please correct

2025 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0050.00.1 Variable: USUALRES Interview Module: Roster Content Type: Annual Core

Question Text:

^DoDoes ^youALIAS usually live here?

Fills:

DoDoes	Description	do/does
	Instruction	If subject=respondent, fill "do"; else if subject NE respondent fill "does"
youALIAS	Description	you/^ALIASNAME
	Instruction	If subject=respondent, fill "you"; else if subject ne respondent, fill "^ALIASNAME"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

All persons where NAME_FNAME ne 999

Skip Instructions:

```
<1> if (PX < 25) [goto USUALRES for next person in household]
    else [goto MISPERS_MCHILD]
    elseif PX=25 and PCNT gt 1 or (PCNT=1 and HHSTAT_D[1]=1) [goto HHRESP]
    elseif PX=25 and PCNT=1 and HHSTAT_D[1]=empty [goto SEX]
    elseif PX=25 and PCNT=0 [goto EXIT]
<2,RF,DK> [goto ASKURE]
```

2025 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0060.00.1 Variable: ASKURE Interview Module: Roster Content Type: Annual Core

Question Text:

^DoDoes ^youALIAS have some other place where ^youthey usually live?

Fills:

DoDoes	Description	do/does
	Instruction	If subject=respondent, fill "do"; else if subject NE respondent fill "does"
youALIAS	Description	you/^ALIASNAME
	Instruction	If subject=respondent, fill "you"; else if subject ne respondent, fill "^ALIASNAME"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]
youthey	Description	you/they
	Instruction	If subject=respondent, fill "you", else if subject NE respondent, fill "they"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

If the usual residence is not here, or respondent refused or didn't know

Skip Instructions:

```
<1> [goto USUALSCHOOL]
<2,RF,DK> if (PX < 25) [goto USUALRES for next person in the household]
    else [goto MISPERM_MCHILD]
    elseif PX=25 and PCNT gt 1 or (PCNT=1 and HHSTAT_D[1]=1) [goto HHRESP]
    elseif PX=25 and PCNT=1 and HHSTAT_D[1]=empty [goto SEX]
    elseif PX=25 and PCNT=0 [goto EXIT]
```

2025 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0070.00.1 Variable: USUALSCHOOL Interview Module: Roster Content Type: Annual Core

Question Text:

^AreIs ^youALIAS usually away at school or college?

Fills:

AreIs	Description	Are/Is
	Instruction	If subject=respondent, fill "Are", else if subject NE respondent, fill "Is"
youALIAS	Description	you/^ALIASNAME
	Instruction	If subject=respondent, fill "you"; else if subject ne respondent, fill "^ALIASNAME"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Person does not usually live in household and usual residence is elsewhere

Skip Instructions:

```
<1> [goto ONOFFCAMPUS]
<2,RF,DK> if (PX < 25) [goto USUALRES for next person in the household]
    else [goto MISPERM_MCHILD]
    elseif PX=25 and PCNT gt 1 or (PCNT=1 and HHSTAT_D[1]=1) [goto HHRESP]
    elseif PX=25 and PCNT=1 and HHSTAT_D[1]=empty [goto SEX]
    elseif PX=25 and PCNT=0 [goto EXIT]
```

2025 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0080.00.1 **Variable:** ONOFFCAMPUS **Interview Module:** Roster **Content Type:** Annual Core

Question Text:

^DoDoes ^youALIAS live in on-campus housing or off-campus housing?

** **Read if necessary:** On-campus housing includes residence halls and dorms where students live together. It also includes buildings that are owned, leased, or managed by the school. Fraternities and sororities are on-campus housing.*

Fills:

DoDoes	Description	do/does
	Instruction	If subject=respondent, fill "do"; else if subject NE respondent fill "does"
youALIAS	Description	you/^ALIASNAME
	Instruction	If subject=respondent, fill "you"; else if subject ne respondent, fill "^ALIASNAME"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

1	On campus
2	Off campus
7	Refused
9	Don't Know

Universe:

Person's usual residence is not in the household and person has a usual residence other than the place of interview and lives away at school or college

Skip Instructions:

```
<1,2,RF,DK> if (PX < 25) [goto USUALRES for next person in the household]
  else [goto MISPER_S_MCHILD]
  elseif PX=25 and PCNT gt 1 or (PCNT=1 and HHSTAT_D[1]=1) [goto HHRESP]
  elseif PX=25 and PCNT=1 and HHSTAT_D[1]=empty [goto SEX]
  elseif PX=25 and PCNT=0 [goto EXIT]
```


2025 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0090.00.1 Variable: MISPERS_MCHILD Interview Module: Roster Content Type: Annual Core

Question Text:

^ROSTEREXCEPTION

^HHROSTERINTRO

^HHROSTER

Have I missed any babies or small children?

Fills:

ROSTEREXCEPTION	Description	Exception to Roster
	Instruction	If PCNT < TOTPCNT, fill: "Students living in on-campus housing will be included in the interview. Other people who do not usually live here and have another residence elsewhere will not be included in this interview."
HHROSTERINTRO	Description	I have listed the household members as...
	Instruction	If PCNT ne 0, fill: I have listed the household members as...
HHROSTER	Description	Entire roster of non deleted people
	Instruction	entire roster for [^ALIASNAME[PX]] if HHSTAT ne 'D' (non deleted persons)
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Less than 25 persons listed on roster

Skip Instructions:

<1>[goto NAME_FNAME to add person to roster]
<2,RF,DK> [goto MISPERS_MSCHOOL]

2025 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0140.00.1 **Variable:** MISPERS_MSCHOOL **Interview Module:** Roster **Content Type:** Annual Core

Question Text:

* **Read if necessary.**

I have listed the household members as...

[^]HHROSTER

Have I missed anyone who USUALLY lives here, but is away now at school or college?

Fills:

HHROSTER	Description	Entire roster of non deleted people
	Instruction	entire roster for [^ALIASNAME[PX]] if HHSTAT ne 'D' (non deleted persons)
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Less than 25 persons listed on roster

Skip Instructions:

<1> [goto ERR_MISPERS_MSCHOOL]
 [goto NAME_FNAME to add person to roster]
 <2,RF,DK> [goto MISPERS_MELSE]

Soft Edit:

Check Text	Check Description	Check Text
ERR_MISPERS_MSCHOOL		{signal ERR_MISPERS_MSCHOOL} Do not read to the respondent. After adding the name of the household member who is now away at school or college to the roster, press the END key, enter '2' at USUALRES, enter '1' at ASKURE, and answer the USUALSCHOOL question. Suppress message to continue.

2025 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0160.00.1 Variable: MISPERS_MELSE Interview Module: Roster Content Type: Annual Core

Question Text:

* [Read if necessary.](#)

I have listed the household members as...

^HHROSTER

Have I missed anyone else who USUALLY lives here, including people who are not related to you or people who are away traveling?

Fills:

HHROSTER	Description	Entire roster of non deleted people
	Instruction	entire roster for [^ALIASNAME[PX]] if HHSTAT ne 'D' (non deleted persons)
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Less than 25 persons listed on roster

Skip Instructions:

```
<1> [goto NAME_FNAME to add person to roster]
<2,RF,DK> if PCNT = 0 [goto EXIT]
    elseif PCNT = 1 [goto SEX]
    elseif PCNT gt 1 or (PCNT=1 and HHSTAT_D[1]=1) [goto HHRESP]
```

2025 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0180.00.1 Variable: HHRESP Interview Module: Roster Content Type: Annual Core

Question Text:

Which adults living here would you say know about the members of this household?

- * Person(s) selected must be over 18.
- * You may select someone who is marked as deleted.
- * Enter all that apply, separate with commas.

Fills:

Response:

01-25	Person Number

Universe:

All households with more than one non-deleted person OR there is only one non-deleted person in the household and deleted person is first person on roster and first person on the roster was answering for the household but does not usually live there.

Skip Instructions:

1 not IN HHRESP [goto HHRESPAVAIL]
One Person selected at HHRESP and that person has HHSTAT_D=1 [goto HHRESPPROXY]
else [goto tblSex.bPerson.SEX]

2025 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0190.00.1 Variable: HHRESPAVAIL Interview Module: Roster Content Type: Annual Core

Question Text:

^HHRESP_fill

Select the line number of the person who can continue the interview.

* If no one is available press F9 to set up a callback.

Fills:

HHRESP_fill	Description	Of the people you just mentioned, who can speak with me now?/Can ^ALIASNAME speak with me now?
	Instruction	If multiple people are selected, fill "Of the people you just mentioned, who can speak with me now?" If one person is selected, fill "Can ^ALIASNAME speak with me now?"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

01-25	Person Number

Universe:

Person to whom you are speaking (LNO=1) is not knowledgeable

Skip Instructions:

<1-25> (person selected at HHRESPAVAIL has HHSTAT_D=1) [goto HHRESPPROXY]
else [goto tblSex.bPerson.SEX]

2025 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0200.00.1 Variable: HHRESPPROXY Interview Module: Roster Content Type: Annual Core

Question Text:

*^ALIASNAME does not usually live here.

^DoyouDoesALIAS take care of someone who lives here?

Fills:

ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]
DoyouDoesALIAS	Description	Do you/Does ^ALIASNAME
	Instruction	For person being spoken to (PX=LNO_RESP)fill: "Do you" For all other adults in family fill: "Does ^ALIASNAME"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Person selected at HHRESP or HHRESPAVAIL has been deleted from the roster.

Skip Instructions:

<1> [goto tblSex.bPerson.SEX]
<2,RF,DK> [goto ERR_HHRESPPROXY]

Soft Edit:

Check Text	Check Description	Check Text
ERR_HHRESPPROXY		{signal ERR_HHRESPPROXY}
		Person was deleted from this household.

2025 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0210.00.1 Variable: SEX Interview Module: Roster Content Type: Annual Core

Question Text:

Some of the questions in this survey are about topics like breast and prostate cancer, so it is important to know which questions apply. ^AreIs ^youALIAS male or female?

Fills:

AreIs	Description	Are/Is
	Instruction	If subject=respondent, fill "Are", else if subject NE respondent, fill "Is"
youALIAS	Description	you/^ALIASNAME
	Instruction	If subject=respondent, fill "you"; else if subject ne respondent, fill "^ALIASNAME"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

1	Male
2	Female
7	Refused
9	Don't Know

Universe:

All nondeleted persons

Skip Instructions:

If last non-deleted person on roster [goto AGENO]
else [goto SEX for next non-deleted person on roster]

2025 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0220.01.1 Variable: AGENO Interview Module: Roster Content Type: Annual Core

Question Text:

* 1 of 2

What is ^yourALIAS age?

* Enter number for age.

Fills:

yourALIAS	Description	your/^ALIASNAME's
	Instruction	If PX=LNO_RESP fill "your"; else fill "^ALIASNAME's"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

001-120	Range of values
997	Refused
999	Don't Know

Universe:

All nondeleted persons

Skip Instructions:

<001-120> [goto AGETP]

<RF,DK> [goto AGE18]

2025 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0220.02.1 Variable: AGETP Interview Module: Roster Content Type: Annual Core

Question Text:

* 2 of 2

* Enter number for age time period.

Fills:

Response:

1	Day(s)
2	Week(s)
3	Month(s)
4	Year(s)

Universe:

Valid number entered at AGENO[PX]

Skip Instructions:

If last non-deleted person on roster AND ((AGENO = RF, DK and AGE18 =1) or AGE LT 018 for everyone) then [goto Exit]
elseif last non-deleted person on roster [goto NATORG]
else [goto AGENO for next non-deleted person on roster]

2025 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0230.00.1 Variable: AGE18 Interview Module: Roster Content Type: Annual Core

Question Text:

Certain sections of this interview depend on knowing if a person is 18 years or older. Could you please tell me if ^youALIAS ^areis less than 18 years old or 18 years or older?

Fills:

youALIAS	Description	you/^ALIASNAME
	Instruction	If subject=respondent, fill "you"; else if subject ne respondent, fill "^ALIASNAME"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]
areis	Description	Are/Is
	Instruction	If subject=respondent, fill "Are", else if subject NE respondent, fill "Is"

Response:

1	Less than 18
2	18 or older
7	Refused
9	Don't Know

Universe:

Refused or did not know age

Skip Instructions:

```
<RF,DK> [goto AGE GUESS]
<2> [goto AGE65]
<1> If last non-deleted person on roster AND ((AGEN0=RF,DK and AGE18=1) or AGE LT 018 for
everyone then [goto Exit]
Else if last non-deleted person on roster [goto NATORG]
Else [goto AGEN0 for next non-deleted person on roster]
```

2025 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0240.00.1 Variable: AGE65 Interview Module: Roster Content Type: Annual Core

Question Text:

^AreIs ^youALIAS less than 65 years old or 65 years or older?

Fills:

AreIs	Description	Are/Is
	Instruction	If subject=respondent, fill "Are", else if subject NE respondent, fill "Is"
youALIAS	Description	you/^ALIASNAME
	Instruction	If subject=respondent, fill "you"; else if subject ne respondent, fill "^ALIASNAME"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

1	Less than 65
2	65 or older
7	Refused
9	Don't Know

Universe:

No numerical age provided and person is 18 or over

Skip Instructions:

<1,2,RF,DK> if last non-deleted person on roster [goto NATORG]
else [goto AGEN0 for next non-deleted person on roster]

2025 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0250.00.1 Variable: AGE GUESS Interview Module: Roster Content Type: Annual Core

Question Text:

* Use your judgement to guess if ^ALIASNAME is less than 18 or 18 or older.

Fills:

ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

1	Less than 18
2	18 or older

Universe:

Skip Instructions:

If last non-deleted person on roster AND AGE GUESS = 1,2 for everyone then [goto Exit]
elseif last non-deleted person on roster [goto NATORG]
else [goto AGENO for next non-deleted person on roster]

2025 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0290.00.1 Variable: NATORG Interview Module: Roster Content Type: Annual Core

Question Text:

^NATORGAGE

Fills:

NATORGAGE	Description	Is ^ALIASNAME Hispanic or Latino?/^DoyouDoesALIAS consider ^yourhimherself to be Hispanic or Latino?
	Instruction	If person is 17 or younger: "Is ^ALIASNAME Hispanic or Latino?" If person is 18 or older: "^DoyouDoesALIAS consider ^yourhimherself to be Hispanic or Latino?"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]
DoyouDoesALIAS	Description	Do you/Does ^ALIASNAME
	Instruction	For person being spoken to (PX=LNO_RESP)fill: "Do you" For all other adults in family fill: "Does ^ALIASNAME"
yourhimherself	Description	yourself/himself/herself/themself
	Instruction	if subject=respondent fill "yourself"; else if SEX=1 fill "himself" else if SEX=2 fill "herself" else if SEX=DK or RF fill "themself"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

All nondeleted persons

Skip Instructions:

If last non-deleted person on roster [goto RACE]
else [goto NATORG for next non-deleted person on roster]

2025 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0300.00.1 Variable: RACE Interview Module: Roster Content Type: Annual Core

Question Text:

^RACEAGE

^RACEFILL

* Enter all that apply, separate with commas.

Fills:

RACEAGE	Description	What race or races is ^ALIASNAME?/What race or races ^dodoes ^youALIAS consider ^yourhimherself to be?
	Instruction	If person is 17 or younger: "What race or races is ^ALIASNAME?" If person is 18 or older: "What race or races ^dodoes ^youALIAS consider ^yourhimherself to be?"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]
dodoes	Description	do/does
	Instruction	If subject=respondent, fill "do"; else if subject NE respondent fill "does"
youALIAS	Description	you/^ALIASNAME
	Instruction	If subject=respondent, fill "you"; else if subject ne respondent, fill "^ALIASNAME"
yourhimherself	Description	yourself/himself/herself/themself
	Instruction	if subject=respondent fill "yourself"; else if SEX=1 fill "himself" else if SEX=2 fill "herself" else if SEX=DK or RF fill "themself"
RACEFILL	Description	Race list fill
	Instruction	For first or only non-deleted person: Please select 1 or more of these categories: White, Black, African American, American Indian, Alaska Native, Native Hawaiian, Pacific Islander, Asian, or some other race? Else fill: *Read if necessary: Please select 1 or more of these categories: White, Black, African American, American Indian, Alaska Native, Native Hawaiian, Pacific Islander, Asian, or some other race?

Response:

01	White
02	Black/African American
03	American Indian
04	Alaska Native
05	Native Hawaiian
06	Other Pacific Islander
07	Asian
08	Some other race

97	Refused
99	Don't Know

Universe:

All nondeleted persons

Skip Instructions:

```
<8> IN RACE [goto RACE_SP]
<1-7,RF,DK> If last non-deleted person on roster AND at least one person with AGE18=2 or
AGEGUESS=2 or AGE[PX] = 17-64 [goto AFNOW]
elseif last non-deleted person on roster [goto EDUC]
else [goto RACE for next non-deleted person on roster]
```

2025 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0310.00.1 Variable: RACE_SP Interview Module: Roster Content Type: Annual Core

Question Text:

^RACESPAGE

Start typing and then select from list. If race is not on the list, type "ZZ" and enter verbatim.

* If any of the following are mentioned, back up to previous screen and correct the entry.

White
Black
African American
American Indian
Alaska Native
Native Hawaiian
Pacific Islander
Asian

* If respondent provides more than one other race, select 'ZZ' from the lookup table. At the next question, enter ALL the other races in the verbatim field.

Fills:

RACESPAGE	Description	What other race or races is ^ALIASNAME?/What other race or races ^dodoes ^youALIAS consider ^yourhimherself to be?
	Instruction	If person is 17 or younger: "What other race or races is ^ALIASNAME?" If person is 18 or older: "What other race or races ^dodoes ^youALIAS consider ^yourhimherself to be?"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]
dodoes	Description	do/does
	Instruction	If subject=respondent, fill "do"; else if subject NE respondent fill "does"
youALIAS	Description	you/^ALIASNAME
	Instruction	If subject=respondent, fill "you"; else if subject ne respondent, fill "^ALIASNAME"
yourhimherself	Description	yourself/himself/herself/themself
	Instruction	if subject=respondent fill "yourself"; else if SEX=1 fill "himself" else if SEX=2 fill "herself" else if SEX=DK or RF fill "themself"

Response:

Verbatim	Verbatim values
ZZ	Other
97	Refused
99	Don't Know

Universe:

Person identifies as some other race

Skip Instructions:

```
<selection from picklist,RF,DK> If last non-deleted person on roster AND at least one person  
with AGE18=2 or AGE GUESS=2 or AGE[PX] = 17-64 [goto AFNOW]  
elseif last non-deleted person on roster [goto EDUC]  
else [goto RACE for next non-deleted person on roster]  
<ZZ> [goto RACE_VRBAT]
```

HHC: Household Composition

Question Text:

^RACESPAGE

RACESPAGE	Description	What other race or races is ^ALIASNAME?/What other race or races ^dodoes ^youALIAS consider ^yourhimherself to be?
	Instruction	If person is 17 or younger: "What other race or races is ^ALIASNAME?" If person is 18 or older: "What other race or races ^dodoes ^youALIAS consider ^yourhimherself to be?"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]
dodoes	Description	do/does
	Instruction	If subject=respondent, fill "do"; else if subject NE respondent fill "does"
youALIAS	Description	you/^ALIASNAME
	Instruction	If subject=respondent, fill "you"; else if subject ne respondent, fill "^ALIASNAME"
yourhimherself	Description	yourself/himself/herself/themself
	Instruction	if subject=respondent fill "yourself"; else if SEX=1 fill "himself" else if SEX=2 fill "herself" else if SEX=DK or RF fill "themself"

Verbatim	Verbatim values
97	Refused
99	Don't Know

Person identifies as some other race and Interviewer does not use pick-list to select this race

```
<allow 80> If last non-deleted person on roster AND at least one person with AGE18=2 or
AGEGUESS=2 or AGE[PX] = 17-64 [goto AFNOW]
elseif last non-deleted person on roster [goto EDUC]
else [goto RACE for next non-deleted person on roster]
```

2025 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0330.00.1 Variable: AFNOW Interview Module: Roster Content Type: Annual Core

Question Text:

^AreYouIsALIASIsanyone now on full-time active duty with the Armed Forces?

***Read if necessary:** Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for service in the U.S. or in a foreign country, in support of military or humanitarian operations.

Fills:

AreYouIsALIASIsanyone	Description	Are you/Is ^ALIASNAME/Is anyone in the household
	Instruction	If PCNTAGEAF=1 and that person=respondent, fill "Are you", elseif PCNTAGEAF=1 and that person NE respondent, fill "Is ^ALIASNAME" elseif PCNTAGEAF GT 1 fill "Is anyone in the household"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

At least one person in the household is greater than 18 and at least one person's age is not guessed and at least one non-deleted person age 17-64 years old or who is greater than or equal to 18 or whose age was guessed to be greater than or equal to 18

Skip Instructions:

```
<1> if GEN.PCNTAGEAF GT 1 [goto AFNOWWHO]
elseif GEN.PCNTAGEAF=1 and GEN.PCNT=1[goto EXIT]
elseif GEN.PCNTAGEAF=1 and GEN.PCNT GT 1[goto EDUC]
<2,RF,DK> [goto EDUC]
```

2025 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0340.00.1 Variable: AFNOWWHO Interview Module: Roster Content Type: Annual Core

Question Text:

Who is this? (Anyone else?)

* Enter all that apply, separate with commas.

Fills:

Response:

01-25	Person Number

Universe:

At least 1 person in the Armed Forces & more than 1 person eligible to be in the Armed Forces

Skip Instructions:

<1-25> if all PX have GEN.HHSTAT_D=1 or GEN.HHSTAT_M = 1 [goto EXIT]
else [goto EDUC]

2025 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0350.00.1 Variable: EDUC Interview Module: Roster Content Type: Annual Core

Question Text:

What is the HIGHEST level of school ^youALIAS ^havehas completed or the highest degree ^youALIAS ^havehas received?

* Enter highest level of school completed.

Fills:

youALIAS	Description	you/^ALIASNAME
	Instruction	If subject=respondent, fill "you"; else if subject ne respondent, fill "^ALIASNAME"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]
havehas	Description	have/has
	Instruction	If subject=respondent, fill "have", else if subject NE respondent fill "has"

Response:

00	Never attended/kindergarten only
01	Grade 1-11
02	12th grade, no diploma
03	GED or equivalent
04	High School Graduate
05	Some college, no degree
06	Associate degree: occupational, technical, or vocational program
07	Associate degree: academic program
08	Bachelor's degree (Example: BA, AB, BS, BBA)
09	Master's degree (Example: MA, MS, MEng, MEd, MBA)
10	Professional School degree (Example: MD, DDS, DVM, JD)
11	Doctoral degree (Example: PhD, EdD)
97	Refused
99	Don't Know

Universe:

All non-deleted persons flagged as aged 18+

Skip Instructions:

<0-11,RF,DK> If last non-deleted adult on roster [goto next section]
else [goto EDUC for next non-deleted adult on roster]

2025 National Health Interview Survey (NHIS) Questionnaire

HHC: Household Composition

Question ID: HHC.0360.00.1 Variable: EXIT Interview Module: Roster Content Type: Annual Core

Question Text:

Not every household in our survey is asked all questions. I have all the information about your household that I need at this time. Thank you for your assistance.

* Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

All armed forces, all usual residence elsewhere, all under age 18, all where aged is guessed

Skip Instructions:

<1> [goto BCK.WHOREADLTR]

2025 National Health Interview Survey (NHIS) Questionnaire

REL: Relationship of children to parents

Question ID: REL.0010.00.1 Variable: WHOPAR Interview Module: Roster Content Type: Annual Core

Question Text:

Which people living in this household are ^ALIASNAME's parents? Please include biological, step, or adoptive parents, but not foster parents or other relatives who may act as parents.

* If respondent is a foster parent or relative who acts as a parent, probe "Does ^ALIASNAME have any biological, step, or adoptive parents living in this household?"

* Enter '0' if no biological, step, or adoptive parents live in the household.

* Legal guardians who are not biological, step, or adoptive parents should not be selected at this question.

* Enter all that apply, separate with commas.

Fills:

ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

00	No biological, step, or adoptive parents
01	Name of Person 1
02	Name of Person 2
03	Name of Person 3
04	Name of Person 4
05	Name of Person 5
06	Name of Person 6
07	Name of Person 7
08	Name of Person 8
09	Name of Person 9
10	Name of Person 10
11	Name of Person 11
12	Name of Person 12
13	Name of Person 13
14	Name of Person 14
15	Name of Person 15
16	Name of Person 16
17	Name of Person 17
18	Name of Person 18
19	Name of Person 19
20	Name of Person 20
21	Name of Person 21
22	Name of Person 22

23	Name of Person 23
24	Name of Person 24
25	Name of Person 25
97	Refused
99	Don't Know

Universe:

All persons with age less than 18 years old or age was guessed or reported to be less than 18

Skip Instructions:

If <0> selected with any other value [goto ERR4_WHOPAR]
 If AGEDIFF LT 15 [goto ERR1_WHOPAR]
 elseif AGEDIFF GE 50 [goto ERR2_WHOPAR]
 elseif AGEDIFF LE 0 [goto ERR3_WHOPAR]
 <0, RF, DK> [goto FOSTPAR]
 <1-25> If last non-deleted child on roster [goto next section]
 else [goto WHOPAR for next non-deleted child on roster]

Hard Edit:

Check Text	Check Description	Check Text
ERR4_WHOPAR	0 and another entry	{check ERR4_WHOPAR} Invalid entry. Cannot mark 0 and a valid line number. Please correct.

Soft Edit:

Check Text	Check Description	Check Text
ERR1_WHOPAR	Age difference between parent selected and child less than 15 years	{signal ERR1_WHOPAR} Age difference between parent and child is ^AGEDIFF years. I have recorded the parent ^PARENTNAME is ^PARENTAGE years old and the child ^CHILDNAME is ^CHILDDAGE years old. Are these ages and relationships correct? Please correct relationship code or age.
ERR2_WHOPAR	Age difference GE 50 years	{signal ERR2_WHOPAR} Age difference between parent and child is greater than or equal to 50 years. I have recorded the parent ^PARENTNAME is ^PARENTAGE years old and the child ^CHILDNAME is ^CHILDDAGE years old. Are these ages and relationships correct? Please correct relationship code or age.
ERR3_WHOPAR	Parent is younger than child	{signal ERR3_WHOPAR} Please verify. Parent is younger than child. I have recorded the parent ^PARENTNAME is ^PARENTAGE years old and the child ^CHILDNAME is ^CHILDDAGE years old. Are these ages and relationships correct? Please correct relationship code or age.

2025 National Health Interview Survey (NHIS) Questionnaire

REL: Relationship of children to parents

Question ID: REL.0040.00.1 Variable: WHOFOST Interview Module: Roster Content Type: Annual Core

Question Text:

Which people living in this household are ^ALIASNAME's foster parents?

Read if necessary: Please include grandparents or other family members if they are acting as foster parents under the supervision of a state or county child welfare agency.

* Enter all that apply, separate with commas.

Fills:

ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

01	Name of Person 1
02	Name of Person 2
03	Name of Person 3
04	Name of Person 4
05	Name of Person 5
06	Name of Person 6
07	Name of Person 7
08	Name of Person 8
09	Name of Person 9
10	Name of Person 10
11	Name of Person 11
12	Name of Person 12
13	Name of Person 13
14	Name of Person 14
15	Name of Person 15
16	Name of Person 16
17	Name of Person 17
18	Name of Person 18
19	Name of Person 19
20	Name of Person 20
21	Name of Person 21
22	Name of Person 22
23	Name of Person 23
24	Name of Person 24
25	Name of Person 25
97	Refused

99	Don't Know

Universe:

Child is in foster care

Skip Instructions:

```
If AGEDIFF LT 15 [goto ERR1_WHOFOST]
elseif AGEDIFF GE 50 [goto ERR2_WHOFOST]
elseif AGEDIFF LE 0 [goto ERR3_WHOFOST]
If last non-deleted child on roster [goto next section]
else [goto WHOPAR for next non-deleted child on roster]
```

Soft Edit:

Check Text	Check Description	Check Text
ERR1_WHOFOST	Age difference between foster parent selected and child less than 15 years	{signal ERR1_WHOFOST} Age difference between parent and child is ^AGEDIFF years. I have recorded the foster parent ^FOSTPARNAME is ^FOSTPARAGE years old and the child ^CHILDNAME is ^CHILDAGE years old. Are these ages and relationships correct? Please correct relationship code or age.
ERR2_WHOFOST	Age difference GE 50 years	{signal ERR2_WHOFOST} Age difference between parent and child is greater than or equal to 50 years. I have recorded the foster parent ^FOSTPARNAME is ^FOSTPARAGE years old and the child ^CHILDNAME is ^CHILDAGE years old. Are these ages and relationships correct? Please correct relationship code or age.
ERR3_WHOFOST	Foster parent is younger than child	{signal ERR3_WHOFOST} Please verify. Parent is younger than child. I have recorded the foster parent ^FOSTPARNAME is ^FOSTPARAGE years old and the child ^CHILDNAME is ^CHILDAGE years old. Are these ages and relationships correct? Please correct relationship code or age.

2025 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0050.00.1 Variable: ALLFAM Interview Module: Roster Content Type: Annual Core

Question Text:

? [F1]

Is everyone in this household a member of the same family?

***Read if necessary:** *For this survey, a family is two or more people living together who are related by birth, marriage, or adoption, as well as any unrelated children who are cared for by the family, such as foster children, and any unmarried couples living together and their children.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

The number of unique families as identified in REL section is greater than 1

Skip Instructions:

IF (Roster.PCNTEligibleSA > 1 OR Roster.PCNTEligibleSC > 1) [goto SASCID]
ELSE [goto procSetFAMILY_FLGs]

2025 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0060.00.1 Variable: SASCID Interview Module: Roster Content Type: Annual Core

Question Text:

One ^SASCID_fill randomly selected from every household in the survey to be asked a series of health related questions. In this household, ^SASCID_fill12 chosen.

Fills:

SASCID_fill	Description	adult and child are/adult is/child is
	Instruction	If PX_A gt 0 and PX_C gt 0, fill "adult and child are" elseif PX_A gt 0, fill "adult is" else fill "child is"
SASCID_fill12	Description	you and ^SCNAME were/^SANAME and ^SCNAME were/you were/^SANAME was/^SCNAME was
	Instruction	If PX_A gt 0 and PX_C gt 0 and HHRESPAVAIL = PX_A, fill "you and ^SCNAME were" elseif PX_A gt 0 and PX_C gt 0 and HHRESPAVAIL ne PX_A, fill "^SANAME and ^SCNAME were" elseif PX_A gt 0 and HHRESPAVAIL = PX_A, fill "you were" elseif PX_A gt 0 and HHRESPAVAIL ne PX_A, fill "^SANAME was" else fill "^SCNAME was"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name

Response:

1	Enter 1 to Continue

Universe:

Count of all persons eligible to be SA is greater than 1 or count of all persons eligible to be SC is greater than 1 or there are multiple adults or children in the family but only 1 adult or child is eligible to be the SA or SC because the others are in the Armed Forces.

Skip Instructions:

```
IF ALLFAM IN (2,RF,DK) AND PX_A > 0 AND PCNTFX_SA_AfterREL < PCNT {Not everyone in same family,
there's a SA, and not everyone's in SA's famly} [goto FAMINTRO_SA]
ELSEIF ALLFAM IN (2,RF,DK) {Not everyone in same family (and there's a SC)} [goto
procSetFX_RELATE_SA]
ELSE [goto procSetFAMILY_FLGs]
```

2025 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0070.00.1 Variable: FAMINTRO_SA Interview Module: Roster Content Type: Annual Core

Question Text:

^FAMINTRO_fill

I will now ask you some questions about how other people in this household are related to ^you_SA.

Fills:

FAMINTRO_fill	Description	FAMINTRO_SA Introduction
	Instruction	If PCNTFX_SA_AFTERREL ge 2, fill "Based on questions I asked you earlier, we have that ^SAFAM are in the same family." else leave fill empty.
SAFAM	Description	List of people in SA's family
	Instruction	For all people with FAMILYA_FLG =1 and are not Household Respondent, fill with their names. If Household Respondent (Roster.HHC.HHRESPAVAIL) is on list of names, fill "you" for name and place name at the beginning of the list. Include Sample Adult in this list.
you_SA	Description	you/^ALIASNAME
	Instruction	If HHRESPAVAIL eq PX_A, fill "you" else fill "^ALIASNAME" of Sample Adult
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

1	Enter 1 to Continue

Universe:

Not everyone in same family, there's a SA, and not everyone's in SA's family

Skip Instructions:

<1> [goto tblRelate_SA.bPerson.RELATE for 1st non-deleted person on roster with FX_REL[PX] ne FX_REL[PX_A]]

2025 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0140.00.1 Variable: FAMINTRO_SC Interview Module: Roster Content Type: Annual Core

Question Text:

I will now ask you some questions about who in this household is related to ^SCNAME.

Based on questions I asked you earlier, we have that ^SCNames_fill related to ^SCNAME.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
SCNames_fill	Description	List of people in Sample Child's family
	Instruction	For all people with GEN.FAMILYC_FLG=1, fill with their names. Description: Person was identified as being in the SC's family at WHOPAR/WHOFOST OR (Sample Child is related to the Sample Adult and person on roster was placed in Sample Adult's family based on answer provided at RELATE), include their name as part of the list of SC's family. Do not Sample Child on list. If Household Respondent (Roster.HHC.HHRESPAVAIL) is on list of names, fill "you" for name and place name at the beginning of the list. If only one person on the list of names and person ne Roster.HHC.HHRESPAVAIL, follow list with "is". If more than one person on the list or only one person on list and person is Household Respondent (Roster.HHC.HHRESPAVAIL), follow list with "are".

Response:

1	Enter 1 to Continue

Universe:

Not everyone in same family and there is a SC, and there is no SA and not everyone in SC's family or SA/SC in separate families and not everyone in SA or SC's families or SA/SC in same family and not everyone in that family

Skip Instructions:

<1> [goto tblRelate_SC.bPerson.RELATE for 1st non-deleted person on roster with FX_RELATESA[PX] ne FX_RELATESA[PX_A] and FX_RELATESA[PX] ne FX_RELATESA[PX_C]]

2025 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0240.00.1 Variable: KNOWSC Interview Module: Roster Content Type: Annual Core

Question Text:

Who lives here and is knowledgeable about and responsible for ^SCNAME's health care?

^ANYONEELSE

* Enter all that apply, separate with commas.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
ANYONEELSE	Description	Anyone else
	Instruction	If PCNT_EligibleKNOWSC > 1 fill: "Read if necessary: Anyone else?"

Response:

00	Not on roster
01-25	Person Number
97	Refused
99	Don't Know

Universe:

There's a SC and either multiple eligible adults or only one eligible adult but that person is not a parent of the SC

Skip Instructions:

```
<RF,DK> [goto NOFAMSC]
<1-25> IF Roster.HHC.tblNAME.bPerson[PX_A].ONOFFCAMPUS IN (1,RF,DK) and (PX_A ne
Roster.HHC.HHRESPAVAIL) [goto ONCAMPINTRO_A]
ELSE [goto CASESTATUS]
```


2025 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0250.00.1 Variable: NOFAMSC Interview Module: Roster Content Type: Annual Core

Question Text:

* Because there are no adults who are related to ^SCNAME living in this household, or respondent refused or did not know who was knowledgeable about and responsible for ^SCNAME's health care, the Sample Child Interview cannot be completed.

Not everyone in our survey is asked all questions. I have all the information that I need from you about ^SCNAME.

* Enter '1' to continue.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Enter 1 to Continue

Universe:

No one is knowledgeable about and responsible for the sample child's health or don't know or refused to identify knowledgeable person

Skip Instructions:

```
<1> if Roster.HHC.tblNAME.bPerson[PX_A].ONOFFCAMPUS IN (1,RF,DK) and (PX_A ne
Roster.HHC.HHRESPAVAIL) [goto ONCAMPINTRO_A]
elseif PX_A > 0 {there is a Sample Adult} [goto CASESTATUS]
else [goto BCK.THANKS_SUF]
```

2025 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0260.00.1 Variable: ONCAMPINTRO_A Interview Module: Roster Content Type: Annual Core

Question Text:

As I previously mentioned ^SANAME was randomly selected to be asked a series of health related questions. We would like to contact ^himherthem to complete ^hishertheir portion of this interview.

Fills:

SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name
himherthem	Description	him/her/them
	Instruction	If GEN.SEX_FINAL=1 fill "him"; else if GEN.SEX_FINAL=2 fill "her"; else if GEN.SEX_FINAL IN (DK, RF) fill "them"
hishertheir	Description	his/her/their
	Instruction	If GEN.SEX_FINAL=1 fill "his"; else if GEN.SEX_FINAL=2 fill "her"; else if GEN.SEX_FINAL IN (DK, RF) fill "their"

Response:

1	Enter 1 to Continue

Universe:

Sample Adult lives on campus or don't know or refuse and Sample Adult is not the Household Respondent

Skip Instructions:

<1>[goto TLNO_FAM_DRM]

2025 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0280.00.1 Variable: ONCAMPLNAME Interview Module: Roster Content Type: Annual Core

Question Text:

* [Ask or verify](#): What is ^SANAME's last name?

Fills:

SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adult lives on campus or don't know or refuse and Sample Adult is not Household Respondent

Skip Instructions:

<allow 20,RF,DK> [goto ONCAMPADD1_A]

2025 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0290.01.1 Variable: ONCAMPADD1_A Interview Module: Roster Content Type: Annual Core

Question Text:

What is ^SANAME's exact mailing address on campus?

* Enter the house or building number, house or building number suffix and street name.

Fills:

SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adult lives on campus or don't know or refuse and Sample Adult is not Household Respondent

Skip Instructions:

<allow 54, empty> [goto ONCAMPADD2_A]

2025 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0290.02.1 Variable: ONCAMPADD2_A Interview Module: Roster Content Type: Annual Core

Question Text:

* Enter the unit description.

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adult lives on campus or don't know or refuse and Sample Adult is not Household Respondent

Skip Instructions:

<allow 54, empty> [goto ONCAMPPO_A]

2025 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0290.04.1 Variable: ONCAMPPO_A Interview Module: Roster Content Type: Annual Core

Question Text:

* Enter the city.

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adult lives on campus or don't know or refuse and Sample Adult is not Household Respondent

Skip Instructions:

<allow 28, empty> [goto ONCAMPST_A]

2025 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0290.05.1 Variable: ONCAMPST_A Interview Module: Roster Content Type: Annual Core

Question Text:

* Enter the state.

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adult lives on campus or don't know or refuse and Sample Adult is not Household Respondent

Skip Instructions:

<allow 2> [goto ONCAMPZIP5_A]

2025 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0290.07.1 Variable: ONCAMPZIP5_A Interview Module: Roster Content Type: Annual Core

Question Text:

* Enter the zip code.

Fills:

Response:

01001-99995	Range of values
99997	Refused
99999	Don't Know

Universe:

Sample Adult lives on campus or don't know or refuse and Sample Adult is not Household Respondent

Skip Instructions:

```
<01001-99996, RF, DK, empty>
if ONCAMPZIP5_A lt 5 characters [goto ERR1_ONCAMPZIP5_A]
elseif ONCAMPZIP5_A lt 01001 [goto ERR2_ONCAMPZIP5_A]
elseif (ONCAMPZIP5_A gt 99996 and SURVTYPE ne T) or (ONCAMPZIP5_A gt
99997 and SURVTYPE=T) [goto ERR3_ONCAMPZIP5_A]
else [goto ONCAMPZIP4_A]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR2_ONCAMPZIP5_A	ONCAMPZIP5_A must be greater than or equal to 01001	{check ERR2_ONCAMPZIP5_A} A valid zip code must be entered. Please correct.
ERR3_ONCAMPZIP5_A	ONCAMPZIP5_A gt 99996/99997	{check ERR3_ONCAMPZIP5_A} A valid zip code must be entered. Please correct.
ERR1_ONCAMPZIP5_A	ONCAMPZIP5_A must have a length of 5	{check ERR1_ONCAMPZIP5_A} The entire zip code must be entered. Please correct.

2025 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0290.08.1 **Variable:** ONCAMPZIP4_A **Interview Module:** Roster **Content Type:** Annual Core

Question Text:

* Enter the zip 4.

Fills:

Response:

0000-9996	Range of values
9997	Refused
9999	Don't Know

Universe:

Sample Adult lives on campus or don't know or refuse and Sample Adult is not Household Respondent

Skip Instructions:

```
<0000-9997, RF, DK, empty>
if ONCAMPZIP4_A lt 4 characters [goto ERR1_ONCAMPZIP4_A]
elseif (ONCAMPZIP4_A gt 9996 and SURVTYPE ne T) or (ONCAMPZIP4_A gt 9997 and SURVTYPE=T) [goto
ERR2_ONCAMPZIP4_A]
else [goto ONCAMPADDR_A]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR2_ONCAMPZIP4_A	ONCAMPZIP4_A gt 9996/9997	{check ERR2_ONCAMPZIP4_A} A valid zip code must be entered. Please correct.
ERR1_ONCAMPZIP4_A	ONCAMPZIP4_A must have a length of 4	{check ERR1_ONCAMPZIP4_A} The entire zip code must be entered. Please correct.

2025 National Health Interview Survey (NHIS) Questionnaire

FAM: Family Composition

Question ID: FAM.0300.00.1 Variable: ONCAMPADDR_A Interview Module: Roster Content Type: Annual Core

Question Text:

Please confirm the following information about the Sample Adult living on campus:

Name: ^SANAME

Phone Number: ^ONCAMPPHONE_fill

Address:

^ONCAMPADD1_A_fill

^ONCAMPADD2_A_fill

^ONCAMPPO_A_fill, ^ONCAMPST_A_fill ^ONCAMPZIP5_A_fill - ^ONCAMPZIP4_A_fill

Fills:

SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name
ONCAMPPHONE_fill	Description	{Value of DISPLAYSTRING}
	Instruction	Fill the phone number associated with the on-campus SA from bContact.arrayPhones [Roster.FAM.TLNO_FAM_DRM].DisplayString
ONCAMPADD1_A_fill	Description	{Value of ONCAMPADD1_A}
	Instruction	Fill value from ONCAMPADD1_A
ONCAMPADD2_A_fill	Description	{Value of ONCAMPADD2_A}
	Instruction	Fill value from ONCAMPADD2_A
ONCAMPPO_A_fill	Description	{Value of ONCAMPPO_A}
	Instruction	Fill value from ONCAMPPO_A
ONCAMPST_A_fill	Description	{Value of ONCAMPST_A}
	Instruction	Fill value from ONCAMPST_A
ONCAMPZIP5_A_fill	Description	{Value of ONCAMPZIP5_A}
	Instruction	Fill value from ONCAMPZIP5_A
ONCAMPZIP4_A_fill	Description	{Value of ONCAMPZIP4_A}
	Instruction	Fill value from at ONCAMPZIP4_A

Response:

1	Enter 1 to Continue

Universe:

Sample Adult lives on campus or don't know or refuse and Sample Adult is not Household Respondent

Skip Instructions:

<1> [goto CASESTATUS]

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0010.00.1 Variable: CURREN_A Interview Module: Adult Content Type: Annual Core

Question Text:

* Enter the line number of the person to whom you are speaking.

Fills:

Response:

00	Not on roster
01	Name of Person 1
02	Name of Person 2
03	Name of Person 3
04	Name of Person 4
05	Name of Person 5
06	Name of Person 6
07	Name of Person 7
08	Name of Person 8
09	Name of Person 9
10	Name of Person 10
11	Name of Person 11
12	Name of Person 12
13	Name of Person 13
14	Name of Person 14
15	Name of Person 15
16	Name of Person 16
17	Name of Person 17
18	Name of Person 18
19	Name of Person 19
20	Name of Person 20
21	Name of Person 21
22	Name of Person 22
23	Name of Person 23
24	Name of Person 24
25	Name of Person 25
97	Refused
99	Don't Know

Universe:

The Sample Adult section has not been started or completed or has a Sample Adult callback setup

Skip Instructions:

<0-25> [goto AVAIL_A]

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0050.00.1 Variable: PROXYLNO_A Interview Module: Adult Content Type: Annual Core

Question Text:

* Select the person in this household who is the proxy for ^SANAME.

Fills:

SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name

Response:

01	^ALIASNAME[1]
02	^ALIASNAME[2]
03	^ALIASNAME[3]
04	^ALIASNAME[4]
05	^ALIASNAME[5]
06	^ALIASNAME[6]
07	^ALIASNAME[7]
08	^ALIASNAME[8]
09	^ALIASNAME[9]
10	^ALIASNAME[10]
11	^ALIASNAME[11]
12	^ALIASNAME[12]
13	^ALIASNAME[13]
14	^ALIASNAME[14]
15	^ALIASNAME[15]
16	^ALIASNAME[16]
17	^ALIASNAME[17]
18	^ALIASNAME[18]
19	^ALIASNAME[19]
20	^ALIASNAME[20]
21	^ALIASNAME[21]
22	^ALIASNAME[22]
23	^ALIASNAME[23]
24	^ALIASNAME[24]
25	^ALIASNAME[25]
97	Refused
99	Don't Know

Universe:

Sample adult proxy is a relative or non relative who lives in the household

Skip Instructions:

```
<1-25> if PROXYLNO_A ne CURREA_A [goto INTMODE_A]  
elseif PROXYLNO_A=CURREA_A and Roster.HHC.tblNAME.bPerson[PX_A].ONOFFCAMPUS IN (1,RF,DK) and  
HHRESPSA_FLG ne 1 [goto VFYONCAMP_A]  
else [goto VFYALL_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0060.00.1 Variable: PROXYCALL_A Interview Module: Adult Content Type: Annual Core

Question Text:

Can a callback with someone knowledgeable about ^SANAME's health be arranged?

Fills:

SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Knowledgeable proxy is not available.

Skip Instructions:

```
<1> [goto bCallback.CB_POSSIBLE], then  
if there is a Sample child and they have not been interviewed [goto Child.VFY.CURRES_C]  
else [goto BCK.THANKS_CB]  
<2> if there is a Sample child and they have not been interviewed [goto Child.VFY.CURRES_C]  
elseif GEN.OUTCOME=203 [goto BCK.THANKS_SUF]  
else [goto BCK.THANKS_INSUF]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0070.00.1 Variable: INTMODE_A Interview Module: Adult Content Type: Annual Core

Question Text:

* How are you contacting ^SARESP?

Fills:

SARESP	Description	Sample Adult respondent's name
	Instruction	Fill Sample Adult respondent's name

Response:

1	Personal visit
2	Telephone

Universe:

Sample Adults 18+ and
 Not initially speaking to the Sample Adult but now speaking to the Sample Adult OR
 Now speaking to a proxy respondent who is not on the roster or refused or don't know if on the roster OR
 Now speaking to a proxy respondent who is on the roster and who wasn't who you were initially speaking to

Skip Instructions:

```
<1> if Roster.HHC.tblNAME.bPerson[PX_A].ONOFFCAMPUS IN (1,RF,DK) and GEN.HHRESPSA_FLG ne 1 [goto VFYONCAMP_A]
else[goto VFYALL_A]
<2> [goto TINTRO_A]
```


2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0080.00.1 Variable: TINTRO_A Interview Module: Adult Content Type: Annual Core

Question Text:

Hello, my name is (* **say your name**). I'm calling from the U.S. Census Bureau. We are conducting the National Health Interview Survey on behalf of the National Center for Health Statistics, part of the Centers for Disease Control and Prevention (CDC). This is a nationwide survey about the health of both adults and children. I have some information from ^HHRESP. Now, I would like to ask you some questions.

* **Read if necessary:** *I believe I am calling you on a cell phone.*

Before we continue, I have to ask: Are you currently driving a vehicle?

* **Even if the respondent is using a hands-free device while driving, you must enter '1'.**

Fills:

HHRESP	Description	{Value of HHRESPAVAIL}
	Instruction	Display the name of the person selected at Roster.HHC.HHRESPAVAIL

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ and interviewer is conducting a telephone interview with new respondent

Skip Instructions:

<1,RF,DK> [goto ATTN_A]
<2> [goto LETTER_A]

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0090.00.1 Variable: ATTN_A Interview Module: Adult Content Type: Annual Core

Question Text:

For your safety, we will call you back at another time.

* Enter 1 to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Adults 18+ and interviewer is conducting a telephone interview with new respondent who is driving

Skip Instructions:

<1> [goto bCallback.CB_POSSIBLE]

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0100.00.1 Variable: LETTER_A Interview Module: Adult Content Type: Annual Core

Question Text:

* If sample adult is a new respondent read question below, otherwise enter 1

* **Read if necessary:** A letter describing the National Health Interview Survey was sent to your home recently. Do you remember seeing the letter?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ and interviewer is conducting a telephone interview with new respondent who is not driving

Skip Instructions:

<1,2,RF,DK> [goto S_INTRO_A]

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0110.00.1 Variable: S_INTRO_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

* If sample adult is a new respondent read question below, otherwise enter 1

* **Read if necessary:** *There are a few things I need to cover before we continue. I'd like you to know that taking part in this survey is voluntary. You may choose not to answer any questions you don't wish to answer, or end the interview at any time without penalty. We are required by Federal Law to develop and follow strict procedures to protect the confidentiality of your information and use your answers only for statistical research. I can describe these laws if you wish. Except for the National Center for Health Statistics and Census Bureau employees and specially designated agents, no one can see your answers until all information that could identify you and/or your family has been removed. Only after that will your data be made available to researchers. For most adults, the survey will take less than ^SATIME minutes. I'd like to continue now unless you have any questions.*

* If respondent asks for more information about the privacy laws, press F1.

Fills:

SATIME	Description	35/45
	Instruction	If GEN.CSTAT=1 and GEN.SAMEFAM_FLG=1, fill: 35 else, fill: 45

Response:

1	Enter 1 to Continue

Universe:

Sample Adults 18+ and interviewer is conducting a telephone interview with new respondent who is not driving

Skip Instructions:

<1> if Roster.HHC.tblNAME.bPerson[PX_A].ONOFFCAMPUS IN (1,RF,DK) and GEN.HHRESPSA_FLG ne 1 [goto VFYONCAMP_A]
else [goto VFYALL_A]

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0120.00.1 Variable: VFYONCAMP_A Interview Module: Adult Content Type: Annual Core

Question Text:

I want to confirm some information.

Do you live in on-campus housing or off-campus housing?

* **Read if necessary:** *On-campus housing includes residence halls and dorms where students live together. It also includes buildings that are owned, leased, or managed by the school. Fraternities and sororities are on-campus housing.*

Fills:

Response:

1	On campus
2	Off campus
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ living in on-campus housing and the Sample Adult is not the household respondent

Skip Instructions:

<1,RF,DK> [goto VFYALL_A]

<2> [goto NOMORE_A]

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0130.00.1 Variable: VFYALL_A Interview Module: Adult Content Type: Annual Core

Question Text:

^Verifyintro

I have recorded ^yoursexis, you are ^AGE_A, ^NATORG_A, and ^RACE_A. Would you like to make any changes to this ^additionalinfo_A?

^RACEVRBATvalue_A

* If respondent "refuses" or says "don't know", enter "2" for "no."

Fills:

Verifyintro	Description	I want to confirm some information.
	Instruction	If VFYONCAMP_A=empty "I want to confirm some information." else fill nothing
yoursexis	Description	your sex is male/your sex is female/you do not know your sex/you do not wish to provide your sex/your sex was not provided
	Instruction	If GEN.SEX_FINAL=1 fill "your sex is male" If GEN.SEX_FINAL=2 fill "your sex is female" If GEN.SEX_FINAL=DK and GEN.HHRESPSA_FLG=1 fill "you do not know your sex" If GEN.SEX_FINAL=RF and GEN.HHRESPSA_FLG=1 fill "you do not wish to provide your sex" If GEN.SEX_FINAL IN (DK,RF) and GEN.HHRESPSA_FLG ne 1 fill "your sex was not provided"
AGE_A	Description	{Value of AGE}/65 or older/between 18 and 64/18 and older
	Instruction	if GEN.AGE_FINAL ne RF, DK fill with age elseif GEN.AGE_FINAL IN (RF,DK) and Roster.HHC.tblAGE.blkPerson[PX_A].AGE65=2 fill "65 or older" elseif GEN.AGE_FINAL in (RF,DK) and Roster.HHC.tblAGE.blkPerson[PX_A].AGE65=1 fill "between 18 and 64" elseif GEN.AGE_FINAL IN (RF, DK) and Roster.HHC.tblAGE.blkPerson[PX_A].AGE65 IN (RF,DK,empty) fill "18 and older"
NATORG_A	Description	Verify Hispanic or Latino origin
	Instruction	If GEN.NATO_FINAL=1 fill: "you are of Hispanic or Latino origin" If GEN.NATO_FINAL=2 fill: "you are not of Hispanic or Latino origin" If GEN.NATO_FINAL=DK and GEN.HHRESPSA_FLG=1 fill: "you do not know if you are of Hispanic or Latino origin" If GEN.NATO_FINAL=RF and GEN.HHRESPSA_FLG=1 fill: "you do not wish to provide information about your Hispanic or Latino origin" If GEN.NATO_FINAL IN (DK,RF) and GEN.HHRESPSA_FLG ne 1 fill "information about your Hispanic or Latino origin was not provided"
RACE_A	Description	you are ^RACEFILLAND_A/you do not know your race/you do not wish to provide your race/your race was not provided
	Instruction	If race or races IN GEN.RACE_FINAL[PX_A].RACE_FINAL fill: "you are ^RACEFILLAND_A." If GEN.RACE_FINAL[PX_A].RACE_FINAL=DK and GEN.HHRESPSA_FLG=1 fill "you do not know your race." If GEN.RACE_FINAL[PX_A].RACE_FINAL=RF and GEN.HHRESPSA_FLG=1 fill: "you do not wish to provide your race." If GEN.RACE_FINAL[PX_A].RACE_FINAL IN (DK,RF) and GEN.HHRESPSA_FLG ne 1 fill "your race was not provided."

RACEFILLAND_A	Description	Categories selected at the RACE screen
	Instruction	Fill categories stored in GEN.RACE_FINAL[PX_A].RACE_FINAL. If more than two categories separate the categories with commas. Add the word "and" before the last category. When GEN.RACE_FINAL[PX_A].RACE_FINAL=8, if GEN.RACE_FINAL[PX_A].RACE_SP_FINAL not in (ZZ,RF,DK) display picklist selection from GEN.RACE_FINAL[PX_A].RACE_SP_FINAL elseif GEN.HHRESPSA_FLG=1 and GEN.RACE_FINAL [PX_A].RACE_VRBAT_FINAL not in (empty,DK,RF) display GEN.RACE_FINAL[PX_A].RACE_VRBAT_FINAL else display "some other race"
additionalinfo_A	Description	if any information is missing "or provide additional information about"
	Instruction	See attachment for fill instructions
RACEVRBATvalue_A	Description	Information collected at RACEVRBAT for Sample Adult
	Instruction	IF GEN.HHRESPSA_FLG ne 1 and GEN.RACE_FINAL [PX_A].RACE_VRBAT_FINAL ne (empty,RF,DK), fill "*" If respondent wants information on which other race they are listed as, say ^RACE_VRBAT."
RACE_VRBAT	Description	{Value of RACE_VRBAT_FINAL}
	Instruction	Fill value from GEN.RACE_FINAL[PX].RACE_VRBAT_FINAL

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample adults 18+ and the Sample Adult or a proxy is available to continue the interview and the Sample Adult is not identified as away at college and living in off-campus housing

Skip Instructions:

```

<1> [goto VFYDEM_A]
<2> if GEN.SEX_FINAL IN (RF,DK) [goto SEXGUESS_A]
    elseif GEN.NATO_FINAL=1 [goto HISPTYPE_A]
    elseif GEN.RACE_FINAL=6 [goto PITYPE_A]
    elseif GEN.RACE_FINAL=7 [goto ASIANTYPE_A]
    elseif (NEWACE_A=8 or (NEWACE_A=empty and GEN.HHRESPSA_FLG ne 1 and
Roster.HHC.tblRACE.bperson.RACE_SP[PX_A] in (ZZ,RF,DK))) [goto RACEOTHER_A]
    else [goto BMONTH_A]

```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0140.00.1 **Variable:** VFYDEM_A **Interview Module:** Adult **Content Type:** Annual Core

Question Text:

- * **Read if necessary:** *What should I change?*
- * **Enter all that apply, separate with commas.**

Fills:

Response:

1	Sex
2	Age
3	Hispanic or Latino Origin
4	Race
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ would like to change demographic information

Skip Instructions:

```

if 1 IN VFYDEM_A [goto NEWSEX_A]
elseif (2,3,4) IN VFYDEM_A and GEN.SEX_FINAL[PX_A] IN (RF,DK) [goto SEXGUESS_A]
elseif 2 IN VFYDEM_A and GEN.SEX_FINAL[PX_A] NOT IN (RF,DK) [goto NEWAGE_A]
elseif 3 IN VFYDEM_A and GEN.SEX_FINAL[PX_A] NOT IN (RF,DK) [goto NEWNATORG_A]
elseif 4 IN VFYDEM_A and GEN.SEX_FINAL[PX_A] NOT IN (RF,DK) [goto NEWRACE_A]
<RF,DK> If GEN.SEX_FINAL[PX_A] IN (RF,DK) [goto SEXGUESS_A]
    elseif GEN.NATO_FINAL=1 [goto HISPTYPE_A]
    elseif GEN.RACE_FINAL=6 [goto PITYPE_A]
    elseif GEN.RACE_FINAL=7 [goto ASIANTYPE_A]
    elseif (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and
Roster.HHC.tblRACE.bperson.RACE_SP[PX_A] in (ZZ,RF,DK))) [goto RACEOTHER_A]
    else [goto BMONTH_A]

```


2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0150.00.1 Variable: NEWSEX_A Interview Module: Adult Content Type: Annual Core

Question Text:

Are you male or female?

Fills:

Response:

1	Male
2	Female
7	Refused
9	Don't Know

Universe:

Respondent said his/her sex is not correct

Skip Instructions:

```
if GEN.SEX_FINAL[PX_A]=RF,DK and NEWSEX_A=RF,DK [goto SEXGUESS_A]
elseif 2 IN VFYDEM_A [goto NEWAGE_A]
elseif 3 IN VFYDEM_A [goto NEWNATORG_A]
elseif 4 IN VFYDEM_A [goto NEWRACE_A]
elseif GEN.NATO_FINAL=1 [goto HISPTYPE_A]
elseif GEN.RACE_FINAL[PX_A].RACE_FINAL=6 [goto PITYPE_A]
elseif GEN.RACE_FINAL[PX_A].RACE_FINAL=7 [goto ASIANATYPE_A]
elseif (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and
Roster.HHC.tblRACE.bperson.RACE_SP[PX_A] in (ZZ,RF,DK))) [goto RACEOTHER_A]
else [goto BMONTH_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0160.00.1 Variable: SEXGUESS_A Interview Module: Adult Content Type: Annual Core

Question Text:

* Enter your best guess of ^SANAME's sex.

Fills:

SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name

Response:

1	Male
2	Female

Universe:

Sample adults for whom there is no sex provided by the household respondent and did not give a sex when asked to verify information

Skip Instructions:

```
<1,2>
if 2 IN VFYDEM_A [goto NEWAGE_A]
elseif 3 IN VFYDEM_A [goto NEWNATORG_A]
elseif 4 IN VFYDEM_A [goto NEWRACE_A]
elseif GEN.NATO_FINAL=1 [goto HISPTYPE_A]
elseif GEN.RACE_FINAL=6 [goto PITYPE_A]
elseif GEN.RACE_FINAL=7 [goto ASIANTYPE_A]
elseif (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and
Roster.HHC.tblRACE.bperson.RACE_SP[PX_A] in (ZZ,RF,DK))) [goto RACEOTHER_A]
else [goto BMONTH_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0170.00.1 Variable: NEWAGE_A Interview Module: Adult Content Type: Annual Core

Question Text:

How old are you?

* [Enter age.](#)

Fills:

Response:

000-120	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adult 18+ said his/her age is not correct

Skip Instructions:

```
<0-120, RF, DK> if 3 IN VFYDEM_A [goto NEWNATORG_A]
elseif 4 IN VFYDEM_A [goto NEWRACE_A]
elseif GEN.NATO_FINAL=1 [goto HISPTYPE_A]
elseif GEN.RACE_FINAL[PX_A].RACE_FINAL=6 [goto PITYPE_A]
elseif GEN.RACE_FINAL[PX_A].RACE_FINAL=7 [goto ASIANATYPE_A]
elseif (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and
Roster.HHC.tblRACE.bperson.RACE_SP[PX_A] in (ZZ,RF,DK))) [goto RACEOTHER_A]
else [goto BMONTH_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0190.00.1 Variable: NEWNATORG_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you consider yourself to be Hispanic or Latino?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adult 18+ said his/her Hispanic Origin is not correct

Skip Instructions:

```
<1,2,RF,DK> if 4 IN VFYDEM_A [goto NEWRACE_A]
elseif GEN.NATO_FINAL=1 [goto HISPTYPE_A]
elseif GEN.RACE_FINAL[PX_A].RACE_FINAL=6 [goto PITYPE_A]
elseif GEN.RACE_FINAL[PX_A].RACE_FINAL=7 [goto ASIANTYPE_A]
elseif (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and
Roster.HHC.tblRACE.bperson.RACE_SP[PX_A] in (ZZ,RF,DK))) [goto RACEOTHER_A]
else [goto BMONTH_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0200.00.1 Variable: NEWRACE_A Interview Module: Adult Content Type: Annual Core

Question Text:

What race or races do you consider yourself to be? Please select 1 or more of these categories:

White, Black, African American, American Indian, Alaska Native, Native Hawaiian, Pacific Islander, Asian, or some other race?

* Enter all that apply, separate with commas.

Fills:

Response:

01	White
02	Black/African American
03	American Indian
04	Alaska Native
05	Native Hawaiian
06	Other Pacific Islander
07	Asian
08	Some other race
97	Refused
99	Don't Know

Universe:

Sample Adult 18+ said his/her race is not correct

Skip Instructions:

```
<1-8,RF,DK> if GEN.NATO_FINAL=1 [goto HISPTYPE_A]
               elseif GEN.RACE_FINAL[PX_A].RACE_FINAL=6 [goto PITYPE_A]
               elseif GEN.RACE_FINAL[PX_A].RACE_FINAL=7 [goto ASIANTYPE_A]
               elseif (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and
Roster.HHC.tblRACE.bperson.RACE_SP[PX_A] in (ZZ,RF,DK))) [goto RACEOTHER_A]
               else [goto BMONTH_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0210.00.1 Variable: HISPTYPE_A Interview Module: Adult Content Type: Annual Core

Question Text:

What is your Hispanic or Latino ancestry or origin, such as Mexican, Mexican American, ^CHICANOA, Central or South American, Puerto Rican, Cuban, Dominican (Republic), or Other Hispanic, ^LATINOA, or Spanish -- and if you have more than one, tell me all of them.

* Enter all that apply, separate with commas.

Fills:

CHICANOA	Description	Chicano/Chicano or Chicana
	Instruction	If SEX_FINAL = 1 fill: "Chicano" if SEX_FINAL = 2,DK,RF fill "Chicano or Chicana"
LATINOA	Description	Latino/Latino or Latina
	Instruction	If SEX_FINAL= 1 fill: "Latino" if SEX_FINAL = 2,DK,RF fill "Latino or Latina"

Response:

01	Mexican, Mexican American, or Chicano(a)
02	Central American
03	South American
04	Puerto Rican
05	Cuban
06	Dominican (Republic)
07	Other Hispanic, Latino(a), or Spanish (specify)
97	Refused
99	Don't Know

Universe:

Respondent is of Hispanic Origin

Skip Instructions:

```
<7> [goto HISPOTHER_A]
<1-6,RF,DK>
if GEN.RACE_FINAL[PX_A]=6 [goto PITYPE_A]
elseif GEN.RACE_FINAL[PX_A]=7 [goto ASIANTYPE_A]
elseif (NEWACE_A=8 or (NEWACE_A=empty and GEN.HHRESPSA_FLG ne 1 and
Roster.HHC.tblRACE.bPerson.RACE_SP[PX_A] in (ZZ,RF,DK))) [goto RACEOTHER_A]
else [goto BMONTH_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0220.00.1 Variable: HISPOTHER_A Interview Module: Adult Content Type: Annual Core

Question Text:

[F1]

What is your Hispanic or Latino ancestry or origin? If you have more than one, tell me all of them.

* Start typing and then select from list. If Hispanic or Latino ancestry is not on the list, type "ZZ" and enter verbatim.

* If any of the following are mentioned, backup to previous screen and correct the entry.

Mexican

Mexican American

Chicano/Chicana

Central American (REFER TO HELP SCREEN)

South American (REFER TO HELP SCREEN)

Puerto Rican (Boricua)

Cuban/Cuban American

Dominican (Republic)

* If respondent provides more than one other Hispanic or Latino ancestry or origin, select 'ZZ' from the lookup table. At the next question, enter ALL the other Hispanic or Latino ancestries or origins in the verbatim field.

Fills:

Response:

Verbatim	Verbatim values
ZZ	Other
97	Refused
99	Don't Know

Universe:

Respondent is of Other Hispanic Origin

Skip Instructions:

```
<ZZ> [goto HISPVRBAT_A]
<lookup table selection,RF,DK> if GEN.RACE_FINAL[PX_A]=6 [goto PITYPE_A]
elseif GEN.RACE_FINAL[PX_A]=7 [goto ASIANTYPE_A]
elseif (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and
Roster.HHC.tblRACE.bPerson.RACE_SP[PX_A] in (ZZ,RF,DK))) [goto RACEOTHER_A]
else [goto BMONTH_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0230.00.1 Variable: HISPVRBAT_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** *What is your Hispanic or Latino ancestry or origin? If you have more than one, tell me all of them.*

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adult 18+ who report some other Hispanic Ancestry and this is not choosen from the picklist

Skip Instructions:

```
<allow 80,RF,DK> if GEN.RACE_FINAL[PX_A].RACE_FINAL=6 [goto PITYPE_A]
elseif GEN.RACE_FINAL[PX_A].RACE_FINAL=7 [goto ASIANTYPE_A]
elseif (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and
Roster.HHC.tb1RACE.bPerson.RACE_SP[PX_A].RACE_FINAL in (ZZ,RF,DK))) [goto RACEOTHER_A]
else [goto BMONTH_A]
```


2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0240.00.1 Variable: PITYPE_A Interview Module: Adult Content Type: Annual Core

Question Text:

I have recorded that you are Pacific Islander. What specific ethnic group or groups are you-- such as Guamanian or Chamorro, Samoan, or other Pacific Islander? If you are more than one, tell me all of them.

* Enter all that apply, separate with commas.

Fills:

Response:

1	Guamanian or Chamorro
2	Samoan
3	Other Pacific Islander
7	Refused
9	Don't Know

Universe:

Respondent identifies race as Pacific Islander

Skip Instructions:

```
<3> [goto PIOTHER_A]
<1,2,RF,DK> if GEN.RACE_FINAL[PX_A].RACE_FINAL=7 [goto ASIANTYPE_A]
elseif (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and
Roster.HHC.tblRACE.bPerson.RACE_SP[PX_A] IN (ZZ,RF,DK))) [goto RACEOTHER_A]
else [goto BMONTH_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0250.00.1 Variable: PIOTHER_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** *I have recorded that you are Pacific Islander. What specific ethnic group or groups are you? If you are more than one, tell me all of them.*

* **Start typing and then select from list.** If Pacific Islander ethnic group is not on the list, type "ZZ" and enter verbatim.

* **If respondent provides more than one ethnic group, select 'ZZ' from the lookup table. At the next question, enter ALL the ethnic groups in the verbatim field.**

Fills:

Response:

Verbatim	Verbatim values
ZZ	Other
97	Refused
99	Don't Know

Universe:

Sample Adult 18+ who identifies as Other Pacific Islander

Skip Instructions:

```
<ZZ> [goto PIVRBAT_A]
<picklist selection, RF, DK>
if GEN.RACE_FINAL[PX_A].RACE_FINAL=7 [goto ASIANTYPE_A]
elseif (NEWRACE_A=8 or (NEWRACE_A=empty and HHRESPSA_FLG ne 1 and
Roster.HHC.tblRACE.bPerson.RACE_SP[PX_A] IN (ZZ,RF,DK))) [goto RACEOTHER_A]
else [goto BMONTH_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0260.00.1 Variable: PIVRBAT_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** *I have recorded that you are Pacific Islander. What specific ethnic group or groups are you? If you are more than one, tell me all of them.*

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adult 18+ who report some other group of Pacific Islander not on the picklist

Skip Instructions:

```
<allow 80,RF,DK>
if GEN.RACE_FINAL[PX_A].RACE_FINAL=7 [goto ASIANTYPE_A]
elseif (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and
Roster.HHC.tblRACE.bPerson.RACE_SP[PX_A] IN (ZZ,RF,DK))) [goto RACEOTHER_A]
else [goto BMONTH_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0270.00.1 Variable: ASIANTYPE_A Interview Module: Adult Content Type: Annual Core

Question Text:

I have recorded that you are Asian. What specific ethnic group or groups are you-- such as Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese, or Other Asian? If you are more than one, tell me all of them.

* Enter all that apply, separate with commas.

Fills:

Response:

01	Asian Indian
02	Chinese
03	Filipino
04	Japanese
05	Korean
06	Vietnamese
07	Other Asian
97	Refused
99	Don't Know

Universe:

Sample Adult identifies race as Asian

Skip Instructions:

```
<7> [goto ASIANOTHER_A]
<1-6,RF,DK>
elseif (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and
Roster.HHC.tblRACE.bPerson.RACE_SP[PX_A] in (ZZ,RF,DK)))[goto RACEOTHER_A]
else [goto BMONTH_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0280.00.1 Variable: ASIANOTHER_A Interview Module: Adult Content Type: Annual Core

Question Text:

What is your specific Asian ethnic group or groups? If you have more than one, tell me all of them.

Start typing and then select from list. If Asian ethnic group is not on the list, type "ZZ" and enter verbatim.

* If any of the following are mentioned, backup to previous screen and correct the entry.

(Asian) Indian

Chinese

Filipino

Japanese

Korean

Vietnamese

* If respondent provides more than one ethnic group, select 'ZZ' from the lookup table. At the next question, enter ALL the ethnic groups in the verbatim field.

Fills:

Response:

Verbatim	Verbatim values
ZZ	Other
97	Refused
99	Don't Know

Universe:

Respondent identifies as other Asian

Skip Instructions:

<allow 80,RF,DK> (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and Roster.HHC.tblRACE.bPerson.RACE_SP[PX_A] in (ZZ,RF,DK))) [goto RACEOTHER_A]
else [goto BMONTH_A]

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0290.00.1 Variable: ASIANVRBAT_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** *What is your specific Asian ethnic group or groups? If you have more than one, tell me all of them.*

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adult 18+ who report some other ethnic group of Asian that is not on the picklist

Skip Instructions:

```
<allow 80,RF,DK>
if (NEWRACE_A=8 or (NEWRACE_A=empty and GEN.HHRESPSA_FLG ne 1 and
Roster.HHC.tblRACE.bPerson.RACE_SP[PX_A] in (ZZ,RF,DK))) [goto RACEOTHER_A]
else [goto BMONTH_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0300.00.1 Variable: RACEOTHER_A Interview Module: Adult Content Type: Annual Core

Question Text:

What other race or races do you consider yourself to be?

Start typing and then select from list. If race is not on the list, type "ZZ" and enter verbatim.

* If respondent provides more than one other race, select 'ZZ' from the lookup table. At the next question, enter ALL the other races in the verbatim field.

Fills:

Response:

Verbatim	Verbatim values
ZZ	Other
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ and race was changed to "some other race" in verification section or where the Sample Adult respondent is not the Household respondent and did not report a new race and were identified by the household respondent as being "some other race" not on the roster other race picklist

Skip Instructions:

<ZZ> [goto RACEVRBAT]
<picklist selection,RF,DK> [goto BMONTH_A]

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0310.00.1 Variable: RACEVRBAT_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** *What other race or races do you consider yourself to be?*

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample adults 18+ who are some other race and this is not selected from Sample adult picklist

Skip Instructions:

<verbatim,RF,DK> [goto BMONTH_A]

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0340.01.1 Variable: BMONTH_A Interview Module: Adult Content Type: Annual Core

Question Text:

* 1 of 3

What is your date of birth?

Please give month, day, and year for the date of birth.

* Enter month of birth.

Fills:

Response:

01	January
02	February
03	March
04	April
05	May
06	June
07	July
08	August
09	September
10	October
11	November
12	December
97	Refused
99	Don't Know

Universe:

Sample adults 18+ and someone is available to continue the interview and date of birth was verified as incorrect fewer than 2 times

Skip Instructions:

<1-12,RF,DK> [goto BDAY_A]

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0340.02.1 Variable: BDAY_A Interview Module: Adult Content Type: Annual Core

Question Text:

* 2 of 3

* Enter day of birth.

Fills:

Response:

01-31	Range of values
97	Refused
99	Don't Know

Universe:

Sample adults 18+ and someone is available to continue the interview and date of birth was verified as incorrect fewer than 2 times

Skip Instructions:

<1-31,RF,DK> Only allow valid days for month entered. if days not valid [goto ERR_BDAY_A]
else [goto BYEAR_A]

Hard Edit:

Check Text	Check Description	Check Text
ERR_BDAY_A	Invalid day for selected month hard edit	{check ERR_BDAY_A}
		^BDAY_A is not a valid day for ^BMONTH_A.

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0340.03.1	Variable: BYEAR_A	Interview Module: Adult	Content Type: Annual Core

Question Text:

- * 3 of 3
- * Enter year of birth.
- * If year of birth is before 1900, enter 1900.

Fills:

Response:

Year	Year
9997	Refused
9999	Don't Know

Universe:

Sample adults 18+ and someone is available to continue the interview and date of birth was verified as incorrect fewer than 2 times

Skip Instructions:

```
<1900-current year,RF,DK>
if (BYEAR_A gt current year) or (BYEAR_A=current year and BMONTH_A gt current month) or
(BYEAR_A=current year and BMONTH_A=current month and BDAY_A gt current day) [goto ERR_BYEAR_A]

elseif BDAY_A=29 and BMONTH_A=2 and (BYEAR=2000 or BYEAR_A/4 remainder ne 0) [goto
ERR_BDAYLEAP_A]

elseif AGETEMP_A IN (DK,RF) and Roster.HHC.tblAGE.bPerson.AGE[PX_A] IN (DK,RF) and
AGE_CALC_A=EMPTY and AGE_CALCMINUS1_A=EMPTY [goto AGE_GUESS_A]

elseif ((BYEAR_A not IN (RF,DK) and AGETEMP_A not IN (RF,DK) and AGETEMP_A ne AGE_CALC_A) AND
(AGETEMP_A not IN (RF,DK) and AGETEMP_A ne AGE_CALCMINUS1_A)) and DOB_COUNT_A ne 1 [goto
VFYDOB_A]

elseif (AGETEMP_A eq (AGE_CALC_A or AGE_CALCMINUS1_A)) or DOB_COUNT_A=1
  if GEN.AGE_FINAL[PX_A] lt 18 [goto NOMORE_A]

else [goto next section]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR_BDAYLEAP_A	Invalid day for selected month hard edit	{check ERR_BDAYLEAP_A}
		^BDAY_A is not a valid day for ^BMONTH_A.
ERR_BYEAR_A	Future date hard edit	{check ERR_BYEAR_A}
		Future date invalid

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0370.00.1 Variable: AGE GUESS_A Interview Module: Adult Content Type: Annual Core

Question Text:

* An age has not been collected and we are unable to determine an age based upon the date of birth.

What is your best guess at ^ALIASNAME's age?

Fills:

ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

018-120	Range of values

Universe:

Sample Adult's age is don't know or refused

Skip Instructions:

<18-120> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0380.00.1 Variable: VFYDOB_A Interview Module: Adult Content Type: Annual Core

Question Text:

There is a difference between the age the computer calculated from your date of birth of ^AGEDOB_A_fill and the age I had previously recorded of ^TEMPAGE_A.

I recorded your ^dateofbirth

Fills:

AGEDOB_A_fill	Description	Age(s) calculated from Date of Birth for SA
	Instruction	Fill one age calculated from AGE_CALC_A as "(age)" Fill two ages calculated from AGE_CALC_A and AGE_CALCMINUS1_A as "(age) or (age)"
TEMPAGE_A	Description	{Value of AGETEMP_A}
	Instruction	Fill value of AGETEMP_A
dateofbirth	Description	date of birth when any of BDAY_A, BMONTH_A or BYEAR_A are not valid
	Instruction	If BDAY_A, BMONTH_A and BYEAR_A are all valid, fill: "date of birth as ^BMONTH_A ^BDAY_A, ^BYEAR_A, is that correct?" If only BMONTH_A and BYEAR_A are valid, fill: "date of birth as ^BMONTH_A ^BYEAR_A, is that correct?" If only BDAY_A and BYEAR_A are valid, fill: "year of birth as ^BYEAR_A, is that correct?" If only BYEAR_A is valid, fill: "year of birth as ^BYEAR_A, is that correct?"
BMONTH_A	Description	{Value of BMONTH_A}
	Instruction	Fill value from Adult.VFY.BMONTH_A
BDAY_A	Description	{Value of BDAY_A}
	Instruction	Fill value from Adult.VFY.BDAY_A
BYEAR_A	Description	{Value of BYEAR_A}
	Instruction	Fill value from Adult.VFY.BYEAR_A

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults whose age provided in either HHC or NEWAGE_A does not match either age calculated from date of birth information

Skip Instructions:

<1,RF,DK> if GEN.AGE_FINAL[PX_A] lt 18 [goto NOMORE_A]
else [goto next section]

<2> if DOB_COUNT_A le 1 [goto BMONTH_A]
else if GEN.AGE_FINAL[PX_A] lt 18 [goto NOMORE_A]
else [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Sample Adult Verification

Question ID: VFY.0390.00.1 Variable: NOMORE_A Interview Module: Adult Content Type: Annual Core

Question Text:

* ^SANAME is no longer the sample adult for this family. End this interview and begin the Sample Child Interview. If there is no Sample Child or the Sample Child interview has been completed, EXIT

Not everyone in our survey is asked all questions. I have all the information that I need about you at this time.

* Enter '1' to Continue.

Fills:

SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name

Response:

1	Enter 1 to Continue

Universe:

Sample adult whose age is now less than 18 or lives off campus

Skip Instructions:

<1> if there is a Sample Child that has not been interviewed [goto Child.VFY.CURRES_C]
else if GEN.OUTCOME IN 215 [goto BCK.THANKS_INSUF]
else [goto BCK.THANKS_SUF]

2025 National Health Interview Survey (NHIS) Questionnaire

HIS: Health Status

Question ID: HIS.0010.00.1 Variable: PHSTAT_A Interview Module: Adult Content Type: Annual Core

Question Text:

Would you say your health in general is excellent, very good, good, fair, or poor?

Fills:

Response:

1	Excellent
2	Very Good
3	Good
4	Fair
5	Poor
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

LSF: Life Satisfaction

Question ID: LSF.0010.00.3 Variable: LSATIS4_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

In general, how satisfied are you with your life? Are you very satisfied, satisfied, dissatisfied, or very dissatisfied?

Fills:

Response:

1	Very satisfied
2	Satisfied
3	Dissatisfied
4	Very dissatisfied
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire
HYP: Hypertension

Question ID: HYP.0010.00.1 Variable: HYPINTRO_A Interview Module: Adult Content Type: Annual Core

Question Text:

Now I am going to ask you about certain medical conditions.
* Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto HYPEV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

HYP: Hypertension

Question ID: HYP.0020.00.1 Variable: HYPEV_A Interview Module: Adult Content Type: Annual Core

Question Text:

Have you EVER been told by a doctor or other health professional that you had

...Hypertension, also called high blood pressure?

* Enter '1' if respondent is taking medication to control his/her high blood pressure.

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto HYPDIF_A]

<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

HYP: Hypertension

Question ID: HYP.0030.00.1 Variable: HYPDIF_A Interview Module: Adult Content Type: Annual Core

Question Text:

Were you told on two or more DIFFERENT visits that you had hypertension or high blood pressure?

* Enter '1' if respondent is taking medication to control his/her high blood pressure.

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were ever told they had hypertension

Skip Instructions:

<1> [goto HYP12M_A]
<2,RF,DK> [goto HYPMED_A]

2025 National Health Interview Survey (NHIS) Questionnaire

HYP: Hypertension

Question ID: HYP.0040.00.1 Variable: HYP12M_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, have you had hypertension or high blood pressure?

* Enter '1' if respondent is taking medication to control his/her high blood pressure.

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were ever told they had hypertension (2+ visits)

Skip Instructions:

<1,2,RF,DK> [goto HYPMED_A]

2025 National Health Interview Survey (NHIS) Questionnaire

HYP: Hypertension

Question ID: HYP.0050.00.1 Variable: HYPMED_A Interview Module: Adult Content Type: Annual Core

Question Text:

Are you NOW taking any medication prescribed by a doctor for your high blood pressure?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were ever told they have hypertension

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

CHL: Cholesterol

Question ID: CHL.0010.00.1 Variable: CHLEV_A Interview Module: Adult Content Type: Annual Core

Question Text:

Have you EVER been told by a doctor or other health professional that you had high cholesterol?

* Enter '1' if respondent is taking medication to control his/her high cholesterol.

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto CHL12M_A]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

CHL: Cholesterol

Question ID: CHL.0020.00.1 Variable: CHL12M_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, have you had high cholesterol?

* Enter '1' if respondent is taking medication to control his/her high cholesterol.

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were ever told they had high cholesterol

Skip Instructions:

<1,2,RF,DK> [goto CHLMED_A]

2025 National Health Interview Survey (NHIS) Questionnaire

CHL: Cholesterol

Question ID: CHL.0030.00.1 Variable: CHLMED_A Interview Module: Adult Content Type: Annual Core

Question Text:

Are you NOW taking any medication prescribed by a doctor to help lower your cholesterol?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were ever told they had high cholesterol

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

CVC: Cardiovascular Conditions

Question ID: CVC.0010.00.1 Variable: CHDEV_A Interview Module: Adult Content Type: Annual Core

Question Text:

Have you EVER been told by a doctor or other health professional that you had

...Coronary heart disease?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto ANGEV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

CVC: Cardiovascular Conditions

Question ID: CVC.0020.00.1 Variable: ANGEV_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** *Have you EVER been told by a doctor or other health professional that you had*

...Angina, also called angina pectoris?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto MIEV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

CVC: Cardiovascular Conditions

Question ID: CVC.0030.00.1 Variable: MIEV_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** *Have you EVER been told by a doctor or other health professional that you had*

...A heart attack, also called myocardial infarction?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto STREV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

CVC: Cardiovascular Conditions

Question ID: CVC.0040.00.1 Variable: STREV_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** *Have you EVER been told by a doctor or other health professional that you had*

...A stroke?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

ASP: Aspirin

Question ID: ASP.0010.00.2 Variable: ASPMEDEV_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Has a doctor or other health professional EVER told you to take a low-dose aspirin each day to prevent or control heart disease?

* If the respondent volunteers they have been told to take an aspirin every other day or "regularly" for these reasons, enter 1 for "yes."

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 40+

Skip Instructions:

<1> [goto ASPMEDNOWN_A]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

ASP: Aspirin

Question ID: ASP.0020.00.2 Variable: ASPMEDNOWN_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Are you NOW following this advice?

* If the respondent provides an answer such as "sometimes," "occasionally," or "from time to time," enter '1' for "yes."

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 40+ who have ever been advised to take a low-dose aspirin every day to prevent or control heart disease

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

AST: Asthma

Question ID: AST.0010.00.1 Variable: ASEV_A Interview Module: Adult Content Type: Annual Core

Question Text:

Have you EVER been told by a doctor or other health professional that you had asthma?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto ASTILL_A]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

AST: Asthma

Question ID: AST.0020.00.1 Variable: ASTILL_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you still have asthma?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were ever told they have asthma

Skip Instructions:

<1,2,RF,DK> [goto ASAT12M_A]

2025 National Health Interview Survey (NHIS) Questionnaire

AST: Asthma

Question ID: AST.0030.00.1 Variable: ASAT12M_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, have you had an episode of asthma or an asthma attack?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were ever told they had asthma

Skip Instructions:

<1,2,RF,DK> [goto ASER12M_A]

2025 National Health Interview Survey (NHIS) Questionnaire

AST: Asthma

Question ID: AST.0040.00.1 Variable: ASER12M_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, have you had to visit an emergency room or urgent care center because of asthma?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were ever told they had asthma

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

CAN: Cancer

Question ID: CAN.0010.00.1 Variable: CANEV_A Interview Module: Adult Content Type: Annual Core

Question Text:

Have you EVER been told by a doctor or other health professional that you had
...Cancer or a malignancy of any kind?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto CANKIND1_A]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

CAN: Cancer

Question ID: CAN.0020.00.1 **Variable:** CANKIND1_A **Interview Module:** Adult **Content Type:** Annual Core

Question Text:

What kind of cancer was it?

* Enter code for the first kind of cancer.

Fills:

Response:

01	Bladder
02	Blood
03	Bone
04	Brain
05	Breast
06	Cervix/Cervical
07	Colon
08	Esophagus/Esophageal
09	Gallbladder
10	Kidney
11	Larynx-trachea
12	Leukemia
13	Liver
14	Lung
15	Lymphoma
16	Melanoma
17	Mouth/tongue/lip
18	Ovary/Ovarian
19	Pancreas/Pancreatic
20	Prostate
21	Rectum/Rectal
22	Skin (melanoma)
23	Skin (non-melanoma)
24	Skin (don't know kind)
25	Stomach
26	Testis/Testicular
27	Throat - pharynx
28	Thyroid
29	Uterus/Uterine
30	Other

97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who were ever told they had cancer

Skip Instructions:

If GEN.SEX_FINAL[PX_A]=1 and CANKIND1_A IN (6,18,29) [goto ERR1_CANKIND_A]
elseif GEN.SEX_FINAL[PX_A]=2 and CANKIND1_A IN (20,26) [goto ERR2_CANKIND_A]
<1-30,RF,DK> [goto CANAGE1_A]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_CANKIND_A	CANKIND_A male soft edit	{signal ERR1_CANKIND_A} Verify. Code 6 or 18 or 29 is unavailable for males.
ERR2_CANKIND_A	CANKIND_A female soft edit	{signal ERR2_CANKIND_A} Verify. Code 20 or 26 is unavailable for females.

2025 National Health Interview Survey (NHIS) Questionnaire

CAN: Cancer

Question ID: CAN.0030.00.1 Variable: CANAGE1_A Interview Module: Adult Content Type: Annual Core

Question Text:

How old were you when a doctor or other health professional first told you that you had
^CANKIND1?

* Enter 1 if reported age is 1 or younger.

Fills:

CANKIND1	Description	{Value of CANKIND1_A}
	Instruction	If CANKIND1_A = RF,DK fill "this cancer"; else fill "bladder cancer" if CANKIND1_A = 1; else fill "blood cancer" if CANKIND1_A = 2; else fill "bone cancer" if CANKIND1_A = 3; else fill "brain cancer" if CANKIND1_A = 4; else fill "breast cancer" if CANKIND1_A = 5; else fill "cervical cancer" if CANKIND1_A = 6; else fill "colon cancer" if CANKIND1_A = 7; else fill "esophageal cancer" if CANKIND1_A = 8; else fill "gallbladder cancer" if CANKIND1_A = 9; else fill "kidney cancer" if CANKIND1_A = 10; else fill "larynx-trachea cancer" if CANKIND1_A = 11; else fill "leukemia" if CANKIND1_A = 12; else fill "liver cancer" if CANKIND1_A = 13; else fill "lung cancer" if CANKIND1_A = 14; else fill "lymphoma" if CANKIND1_A = 15; else fill "melanoma" if CANKIND1_A = 16; else fill "mouth/tongue/lip cancer" if CANKIND1_A = 17; else fill "ovarian cancer" if CANKIND1_A = 18; else fill "pancreatic cancer" if CANKIND1_A = 19; else fill "prostate cancer" if CANKIND1_A = 20; else fill "rectal cancer" if CANKIND1_A = 21; else fill "skin (melanoma) cancer" if CANKIND1_A = 22; else fill "skin (non-melanoma) cancer" if CANKIND1_A = 23; else fill "skin (don't know kind) cancer" if CANKIND1_A = 24; else fill "stomach cancer" if CANKIND1_A = 25; else fill "testicular cancer" if CANKIND1_A = 26; else fill "throat/pharynx cancer" if CANKIND1_A = 27; else fill "thyroid cancer" if CANKIND1_A = 28; else fill "uterine cancer" if CANKIND1_A = 29; else fill "other cancer" if CANKIND1_A = 30

Response:

001-120	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adults 18+ who were ever told they had cancer

Skip Instructions:

<1-120,DK> [goto CANKIND2_A]
 <RF> if CANKIND1_A=RF [goto next section] else [goto CANKIND2_A]
 If number in CANAGE1_A gt GEN.AGE_FINAL[PX_A] [goto ERR_CANAGE1_A]

Hard Edit:

Check Text	Check Description	Check Text
ERR_CANAGE1_A	CANAGE1_A years with cancer greater than age hard edit	{check ERR_CANAGE1_A} ^CANAGE1_A years old is older than age ^SA_AGE. Please correct.

2025 National Health Interview Survey (NHIS) Questionnaire

CAN: Cancer

Question ID: CAN.0040.00.1 Variable: CANKIND2_A Interview Module: Adult Content Type: Annual Core

Question Text:

Have you EVER had any other kinds of cancer?

* If yes, ask respondent for second kind of cancer, enter code.

* If no, enter '96' for no more.

Fills:

Response:

01	Bladder
02	Blood
03	Bone
04	Brain
05	Breast
06	Cervix/Cervical
07	Colon
08	Esophagus/Esophageal
09	Gallbladder
10	Kidney
11	Larynx-trachea
12	Leukemia
13	Liver
14	Lung
15	Lymphoma
16	Melanoma
17	Mouth/tongue/lip
18	Ovary/Ovarian
19	Pancreas/Pancreatic
20	Prostate
21	Rectum/Rectal
22	Skin (melanoma)
23	Skin (non-melanoma)
24	Skin (don't know kind)
25	Stomach
26	Testis/Testicular
27	Throat - pharynx
28	Thyroid
29	Uterus/Uterine

30	Other
96	No more
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who were ever told they had cancer and mentioned or didn't know a first type of cancer OR gave a valid age or did not know age for first cancer

Skip Instructions:

```
If GEN.SEX_FINAL[PX_A]=1 and CANKIND2_A IN (6,18,29) [goto ERR1_CANKIND_A]
elseif GEN.SEX_FINAL[PX_A]=2 and CANKIND2_A IN (20,26) [goto ERR2_CANKIND_A]
<1-30,RF,DK> [goto CANAGE2_A]
<96> [goto next section]
```

2025 National Health Interview Survey (NHIS) Questionnaire

CAN: Cancer

Question ID: CAN.0050.00.1 Variable: CANAGE2_A Interview Module: Adult Content Type: Annual Core

Question Text:

How old were you when a doctor or other health professional first told you that you had
^CANKIND2?

* Enter 1 if reported age is 1 or younger.

Fills:

CANKIND2	Description	{Value of CANKIND2_A}
	Instruction	If CANKIND2_A = R,D fill "this cancer"; else fill "bladder cancer" if CANKIND2_A = 1; else fill "blood cancer" if CANKIND2_A = 2; else fill "bone cancer" if CANKIND2_A = 3; else fill "brain cancer" if CANKIND2_A = 4; else fill "breast cancer" if CANKIND2_A = 5; else fill "cervical cancer" if CANKIND2_A = 6; else fill "colon cancer" if CANKIND2_A = 7; else fill "esophageal cancer" if CANKIND2_A = 8; else fill "gallbladder cancer" if CANKIND2_A = 9; else fill "kidney cancer" if CANKIND2_A = 10; else fill "larynx-trachea cancer" if CANKIND2_A = 11; else fill "leukemia" if CANKIND2_A = 12; else fill "liver cancer" if CANKIND2_A = 13; else fill "lung cancer" if CANKIND2_A = 14; else fill "lymphoma" if CANKIND2_A = 15; else fill "melanoma" if CANKIND2_A = 16; else fill "mouth/tongue/lip cancer" if CANKIND2_A = 17; else fill "ovarian cancer" if CANKIND2_A = 18; else fill "pancreatic cancer" if CANKIND2_A = 19; else fill "prostate cancer" if CANKIND2_A = 20; else fill "rectal cancer" if CANKIND2_A = 21; else fill "skin (melanoma) cancer" if CANKIND2_A = 22; else fill "skin (non-melanoma) cancer" if CANKIND2_A = 23; else fill "skin (don't know kind) cancer" if CANKIND2_A = 24; else fill "stomach cancer" if CANKIND2_A = 25; else fill "testicular cancer" if CANKIND2_A = 26; else fill "throat/pharynx cancer" if CANKIND2_A = 27; else fill "thyroid cancer" if CANKIND2_A = 28; else fill "uterine cancer" if CANKIND2_A = 29; else fill "other cancer" if CANKIND2_A = 30

Response:

001-120	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adults 18+ who selected a second kind of cancer or don't know the second kind of cancer
or refused the second kind of cancer

Skip Instructions:

<1-120,DK> [goto CANKIND3_A]
 <RF> if CANKIND2_A=RF [goto next section] else [goto CANKIND3_A]
 If CANAGE2_A gt GEN.AGE_FINAL[PX_A] [goto ERR_CANAGE2_A]

Hard Edit:

Check Text	Check Description	Check Text
ERR_CANAGE2_A	CANAGE2_A age greater than years with cancer hard edit	{check ERR_CANAGE2_A} ^CANAGE2_A years old is older than age ^SA_AGE. Please correct.

2025 National Health Interview Survey (NHIS) Questionnaire

CAN: Cancer

Question ID: CAN.0060.00.1 Variable: CANKIND3_A Interview Module: Adult Content Type: Annual Core

Question Text:

Have you EVER had any other kinds of cancer?

* If yes, ask respondent for third kind of cancer, enter code.

* If no, enter '96' for no more.

Fills:

Response:

01	Bladder
02	Blood
03	Bone
04	Brain
05	Breast
06	Cervix/Cervical
07	Colon
08	Esophagus/Esophageal
09	Gallbladder
10	Kidney
11	Larynx-trachea
12	Leukemia
13	Liver
14	Lung
15	Lymphoma
16	Melanoma
17	Mouth/tongue/lip
18	Ovary/Ovarian
19	Pancreas/Pancreatic
20	Prostate
21	Rectum/Rectal
22	Skin (melanoma)
23	Skin (non-melanoma)
24	Skin (don't know kind)
25	Stomach
26	Testis/Testicular
27	Throat - pharynx
28	Thyroid
29	Uterus/Uterine

30	Other
96	No more
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who selected a second kind of cancer or don't know the second kind of cancer or gave a valid age for second cancer or did not know age for second cancer

Skip Instructions:

If GEN.SEX_FINAL=1 and CANKIND3_A IN (6,18,29) [goto ERR1_CANKIND_A]
elseif GEN.SEX_FINAL=2 and CANKIND3_A IN (20,26) [goto ERR2_CANKIND_A]
<1-30,RF,DK>[goto CANAGE3_A]
<96> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

CAN: Cancer

Question ID: CAN.0070.00.1 Variable: CANAGE3_A Interview Module: Adult Content Type: Annual Core

Question Text:

How old were you when a doctor or other health professional first told you that you had
^CANKIND3?

* Enter 1 if reported age is 1 or younger.

Fills:

CANKIND3	Description	{Value of CANKIND3_A}
	Instruction	If CANKIND3_A = R,D fill "this cancer"; else fill "bladder cancer" if CANKIND3_A = 1; else fill "blood cancer" if CANKIND3_A = 2; else fill "bone cancer" if CANKIND3_A = 3; else fill "brain cancer" if CANKIND3_A = 4; else fill "breast cancer" if CANKIND3_A = 5; else fill "cervical cancer" if CANKIND3_A = 6; else fill "colon cancer" if CANKIND3_A = 7; else fill "esophageal cancer" if CANKIND3_A = 8; else fill "gallbladder cancer" if CANKIND3_A = 9; else fill "kidney cancer" if CANKIND3_A = 10; else fill "larynx-trachea cancer" if CANKIND3_A = 11; else fill "leukemia" if CANKIND3_A = 12; else fill "liver cancer" if CANKIND3_A = 13; else fill "lung cancer" if CANKIND3_A = 14; else fill "lymphoma" if CANKIND3_A = 15; else fill "melanoma" if CANKIND3_A = 16; else fill "mouth/tongue/lip cancer" if CANKIND3_A = 17; else fill "ovarian cancer" if CANKIND3_A = 18; else fill "pancreatic cancer" if CANKIND3_A = 19; else fill "prostate cancer" if CANKIND3_A = 20; else fill "rectal cancer" if CANKIND3_A = 21; else fill "skin (melanoma) cancer" if CANKIND3_A = 22; else fill "skin (non-melanoma) cancer" if CANKIND3_A = 23; else fill "skin (don't know kind) cancer" if CANKIND3_A = 24; else fill "stomach cancer" if CANKIND3_A = 25; else fill "testicular cancer" if CANKIND3_A = 26; else fill "throat/pharynx cancer" if CANKIND3_A = 27; else fill "thyroid cancer" if CANKIND3_A = 28; else fill "uterine cancer" if CANKIND3_A = 29; else fill "other cancer" if CANKIND3_A = 30

Response:

001-120	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adults 18+ who selected a third kind of cancer or don't know or refused the third kind of cancer

Skip Instructions:

<1-120,DK> [goto CANMORE_A]
 <RF> if CANKIND3_A=RF [goto next section] else [goto CANMORE_A]
 if CANAGE3_A gt GEN.AGE_FINAL[PX_A] [goto ERR_CANAGE3_A]

Hard Edit:

Check Text	Check Description	Check Text
ERR_CANAGE3_A	CANAGE3_A age with cancer greater than age	{check ERR_CANAGE3_A} ^CANAGE3_A years old is older than age ^SA_AGE. Please correct.

2025 National Health Interview Survey (NHIS) Questionnaire

CAN: Cancer

Question ID: CAN.0080.00.1 Variable: CANMORE_A Interview Module: Adult Content Type: Annual Core

Question Text:

Did you have any other kinds of cancer?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who selected a third kind of cancer or don't know the third kind of cancer or selected a valid age for third type of cancer or did not know age for third type of cancer

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0010.00.1 Variable: PREDIB_A Interview Module: Adult Content Type: Annual Core

Question Text:

Has a doctor or other health professional EVER told you that you had prediabetes or borderline diabetes?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> If GEN.SEX_FINAL[PX_A]=2 [goto GESDIB_A]
elseif GEN.SEX_FINAL[PX_A]=1,RF,DK [goto DIBEV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0020.00.1 Variable: GESDIB_A Interview Module: Adult Content Type: Annual Core

Question Text:

Has a doctor or other health professional EVER told you that you had gestational diabetes, a type of diabetes that occurs ONLY during pregnancy?

* **Read if necessary:** *Gestational diabetes is diabetes that you did not have before being pregnant and goes away after you are pregnant. Pregnant women are usually screened for gestational diabetes during the 24th to 28th week of pregnancy.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Female Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto DIBEV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0030.00.1 Variable: DIBEV_A Interview Module: Adult Content Type: Annual Core

Question Text:

^NOTPREGDM a doctor or other health professional EVER told you that you had diabetes?

Fills:

NOTPREGDM	Description	Has/Not including (gestational diabetes, prediabetes), has
	Instruction	If GESDIB_A ne 1 AND PREDIB_A ne 1: "Has" If GESDIB_A=1 AND PREDIB_A ne 1: "Not including gestational diabetes, has" If PREDIB_A=1 AND GESDIB_A ne 1: "Not including prediabetes, has" If GESDIB_A=1 AND PREDIB_A=1: "Not including prediabetes or gestational diabetes, has"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto DIBAGE_A]
<2,RF,DK> if PREDIB_A=1 [goto DIBPILL_A]
else if PREDIB_A=2,RF,DK [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0040.00.1 Variable: DIBAGE_A Interview Module: Adult Content Type: Annual Core

Question Text:

How old were you when a doctor or other health professional FIRST told you that you had diabetes^NOTPREGDM2?

* Enter '1' if reported age is 1 or younger.

Fills:

NOTPREGDM2	Description	not including (gestational diabetes, prediabetes)
	Instruction	If GESDIB_A ne 1 AND PREDIB_A ne 1: NO FILL If GESDIB_A=1 AND PREDIB_A ne 1: ", not including gestational diabetes" If PREDIB_A=1 AND GESDIB_A ne 1: ", not including prediabetes" If GESDIB_A=1 AND PREDIB_A=1: ", not including prediabetes or gestational diabetes"

Response:

001-120	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adults 18+ who were told they had diabetes

Skip Instructions:

<1-120,RF,DK> if DIBAGE_A gt GEN.AGE_FINAL [goto ERR_DIBAGE_A]
else [goto DIBPILL_A]

Hard Edit:

Check Text	Check Description	Check Text
ERR_DIBAGE_A	DIBAGE_A age greater than SA age hard edit	{check ERR_DIBAGE_A} ^DIBAGE_A years old is older than your age ^SA_AGE. Please correct.

2025 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0050.00.1 Variable: DIBPILL_A Interview Module: Adult Content Type: Annual Core

Question Text:

Are you NOW taking diabetic pills to lower your blood sugar? These are sometimes called oral agents or oral hypoglycemic agents.

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were told they had prediabetes and/or diabetes

Skip Instructions:

<1-2,RF,DK> [goto DIBINS_A]

2025 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0060.00.1 Variable: DIBINS_A Interview Module: Adult Content Type: Annual Core

Question Text:

Insulin can be taken by shot or pump. Are you NOW taking insulin?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were told they had prediabetes and/or diabetes

Skip Instructions:

```
<1> if DIBEV_A=1 [goto DIBINSTIME_A]
else [goto DIBGLP_A]
<2,RF,DK> [goto DIBGLP_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0070.00.3 Variable: DIBINSTIME_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Thinking back to when you were first diagnosed with diabetes, how long was it before you started taking insulin?

Fills:

Response:

1	Less than 1 month
2	1 month to less than 6 months
3	6 months to less than 1 year
4	1 year or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have diabetes and currently take insulin

Skip Instructions:

<1-4,RF,DK> [goto DIBINSSTOP_A]

2025 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0080.00.3 Variable: DIBINSSTOP_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Since you started taking insulin, have you ever stopped taking it for more than 6 months?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have diabetes and are taking insulin

Skip Instructions:

```
<1> if DIBINSTIME_A IN (1,2,3) [goto DIBINSSTYR_A]
else [goto DIBGLP_A]
<2,RF,DK> [goto DIBGLP_A]
```


2025 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0090.00.3 Variable: DIBINSSTYR_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Was this only during the first year after you were diagnosed with diabetes?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have diabetes, who started taking insulin less than 1 year from when they were diagnosed with diabetes, and who stopped taking insulin for more than 6 months

Skip Instructions:

<1,2,RF,DK> [goto DIBGLP_A]

2025 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0130.00.3 Variable: DIBGLP_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

^INSULIN NOW taking any injectable medications to lower your blood sugar or lose weight?

* **Read if necessary:** *These medications include GLP-1 injectables, such as Ozempic® (oh-ZEM-pik), Wegovy® (Wee-GOH-vee), Saxenda®, Victoza®, Trulicity®, Mounjaro® (moun-JER-roh), and Byetta®.*

Fills:

INSULIN	Description	Other than insulin, are you/Are you
	Instruction	If DIBINS_A=1, fill: "Other than insulin, are you" else, fill: "Are you"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were told they had prediabetes and/or diabetes

Skip Instructions:

<1,2,RF,DK> if DIBEV_A=1 [goto DIBTYPE_A]
else [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0140.00.1 Variable: DIBTYPE_A Interview Module: Adult Content Type: Annual Core

Question Text:

According to your doctor or other health professional, what type of diabetes do you have? Is it type 1, type 2, or some other type? If you don't remember or weren't told, that's OK.

Fills:

Response:

1	Type 1
2	Type 2
3	Other type of diabetes
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were told they had diabetes

Skip Instructions:

<1-3,RF,DK> [goto DIBSTRESS]

2025 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0150.00.3 Variable: DIBSTRESS_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

During the past month, how often have you felt overwhelmed by the demands of living with diabetes? Would you say always, usually, sometimes, rarely, or never?

Fills:

Response:

1	Always
2	Usually
3	Sometimes
4	Rarely
5	Never
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were told they had diabetes

Skip Instructions:

<1-5,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

CON: Other Chronic Conditions

Question ID: CON.0010.00.1 Variable: COPDEV_A Interview Module: Adult Content Type: Annual Core

Question Text:

Have you EVER been told by a doctor or other health professional that you had
...Chronic Obstructive Pulmonary Disease, C.O.P.D., emphysema, or chronic bronchitis?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto ARTHEV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

CON: Other Chronic Conditions

Question ID: CON.0020.00.1 Variable: ARTHEV_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** *Have you EVER been told by a doctor or other health professional that you had*

...Some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia (fy-bro-my-AL-jee-uh)?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto DEMENEV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

CON: Other Chronic Conditions

Question ID: CON.0030.00.1 Variable: DEMENEV_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** *Have you EVER been told by a doctor or other health professional that you had*

...Dementia, including Alzheimer's disease?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto ANXEV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

CON: Other Chronic Conditions

Question ID: CON.0040.00.1 Variable: ANXEV_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** Have you EVER been told by a doctor or other health professional that you had

...Any type of anxiety disorder?

* **Read if necessary:** Some common types of anxiety disorders include generalized anxiety disorder, social anxiety disorder, panic disorder, post-traumatic stress disorder, obsessive-compulsive disorder, and phobias.

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto DEPEV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

CON: Other Chronic Conditions

Question ID: CON.0050.00.1 Variable: DEPEV_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** Have you EVER been told by a doctor or other health professional that you had

...Any type of depression?

* **Read if necessary:** Some common types of depression include major depression (or major depressive disorder), bipolar depression, dysthymia, post-partum depression, and seasonal affective disorder.

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

ADH: Attention Deficit/Hyperactivity Disorder

Question ID: ADH.0010.00.3 Variable: ADHDEV_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Has a doctor or other health professional EVER told you that you had Attention-Deficit/Hyperactivity Disorder or ADHD or Attention-Deficit Disorder or ADD?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto ADHDNW_A]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

ADH: Attention Deficit/Hyperactivity Disorder

Question ID: ADH.0020.00.3 Variable: ADHDNW_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Do you currently have Attention-Deficit/Hyperactivity Disorder or ADHD or Attention-Deficit Disorder or ADD?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were ever told they had ADHD

Skip Instructions:

<1,2,RF,DK> [goto ADHDAGE_A]

2025 National Health Interview Survey (NHIS) Questionnaire

ADH: Attention Deficit/Hyperactivity Disorder

Question ID: ADH.0030.00.3 Variable: ADHDAGE_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

How old were you when a doctor or other health professional FIRST told you that you had ADHD or ADD?

Fills:

Response:

001-120	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adults 18+ who were ever told they had ADHD

Skip Instructions:

<1-120,DK,RF> If number in ADHDAGE_A gt GEN.AGE_FINAL[PX_A] [goto ERR_ADHDAGE_A]
else [goto ADHDMED_A]

Hard Edit:

Check Text	Check Description	Check Text
ERR_ADHDAGE_A	ADHDAGE_A years with ADHD greater than age hard edit	{check ERR_ADHDAGE_A} ^ADHDAGE_A years old is older than age ^SA_AGE. Please correct.

2025 National Health Interview Survey (NHIS) Questionnaire

ADH: Attention Deficit/Hyperactivity Disorder

Question ID: ADH.0040.00.3 Variable: ADHDMED_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Do you currently take prescription medication for ADHD or ADD?

***Read if necessary:** Prescription medications for ADHD include stimulant medications such as Adderall, Ritalin, and Concerta, as well as non-stimulant medications such as Strattera, Qelbree, and Intuniv.

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were ever told they had ADHD

Skip Instructions:

<1,2,RF,DK> [goto ADHDTHRPY_A]

2025 National Health Interview Survey (NHIS) Questionnaire

ADH: Attention Deficit/Hyperactivity Disorder

Question ID: ADH.0050.00.3 Variable: ADHDTHRPY_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

During the past 12 months, did you receive counseling, therapy, or behavioral treatment for ADHD or ADD?

* **Read if necessary:** Include counseling, therapy, or behavioral treatments received from mental health professional such as a psychiatrist, psychologist, psychiatric nurse, ADHD coach, or clinical social worker.

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were ever told they had ADHD

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

EPI: Epilepsy

Question ID: EPI.0010.00.3 Variable: EPIEV_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Have you ever been told by a doctor or other health professional that you have a seizure disorder or epilepsy?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto EPIMED_A]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

EPI: Epilepsy

Question ID: EPI.0020.00.3 Variable: EPIMED_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Are you currently taking any medicine to control your seizure disorder or epilepsy?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who ever had epilepsy

Skip Instructions:

<1,2,RF,DK> [goto EPINUMSEIZ_A]

2025 National Health Interview Survey (NHIS) Questionnaire

EPI: Epilepsy

Question ID: EPI.0030.00.3 Variable: EPINUMSEIZ_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Today is ^CURRENTDATE. Think back to last year about the same time. About how many seizures of any type have you had during the past 12 months?

* **Read if necessary:** Some people may call it a "convulsion," "fit," "falling out spell," "episode," "attack," "drop attack," "staring spell," or "out-of-touch."

* **If the respondent mentions and counts "auras" as seizures accept the response.**

* **If the respondent indicates that he/she has had nothing more than an aura and is unsure about counting the aura(s), do NOT count auras as seizures.**

Fills:

CURRENTDATE	Description	This fill will show the current date
	Instruction	Fill with current month, day, and year at the time of the interview.

Response:

0	
1	1
2	2 or 3
3	Between 4 and 10
4	More than 10
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who ever had epilepsy

Skip Instructions:

<0-4,RF,DK> [goto EPIDR_A]

2025 National Health Interview Survey (NHIS) Questionnaire

EPI: Epilepsy

Question ID: EPI.0040.00.3 Variable: EPIDR_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

During the past 12 months, have you seen a neurologist or epilepsy specialist for your seizure disorder or epilepsy?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who ever had epilepsy

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

BMI: Current pregnancy, height, weight

Question ID: BMI.0010.00.1 Variable: PREGNOW_A Interview Module: Adult Content Type: Annual Core

Question Text:

Are you currently pregnant?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Female Sample Adults 18-49 or age is don't know or refused

Skip Instructions:

<1,2,DK> [goto LIVEBIRTH1_A]
<RF> [goto HEIGHTFT_A]

2025 National Health Interview Survey (NHIS) Questionnaire

BMI: Current pregnancy, height, weight

Question ID: BMI.0015.00.3 Variable: LIVEBIRTH1_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

During the past 12 months, did you have a pregnancy that ended in a live birth?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Female sample adults aged 18-49 of age or age is refused or don't know who did not refuse to answer if they are currently pregnant

Skip Instructions:

<1,2,RF,DK> [goto HEIGHTFT_A]

2025 National Health Interview Survey (NHIS) Questionnaire

BMI: Current pregnancy, height, weight

Question ID: BMI.0020.01.1 Variable: HEIGHTFT_A Interview Module: Adult Content Type: Annual Core

Question Text:

How tall are you without shoes?

* Enter M to record metric measurements.

* If ^SANAME's height is less than 2 feet, enter 2. If ^SANAME's height is greater than 7 feet, enter 7.

Fills:

SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name

Response:

02	2 feet
03	3 feet
04	4 feet
05	5 feet
06	6 feet
07	7 feet
M	Answered in Metric
97	Refused
99	Don't Know

Universe:

Sample Adult 18+

Skip Instructions:

If HEIGHTFT_A NE <2-7,RF,DK,M> [goto ERR1_HEIGHTFT_A]
If HEIGHTFT_A = <2,3> [goto ERR2_HEIGHTFT_A]

<2-7> [goto HEIGHTIN_A]
<RF,DK> [goto WEIGHTLB_A]
<M> [goto HEIGHTM_A]

Hard Edit:

Check Text	Check Description	Check Text
ERR1_HEIGHTFT_A	Hard edit for height in feet	{check ERR1_HEIGHTFT_A} Only 2-7, Don't Know/Refused or M allowed in this field. Please correct.

Soft Edit:

Check Text	Check Description	Check Text
ERR2_HEIGHTFT_A	Soft edit to verify height in feet	{signal ERR2_HEIGHTFT_A} Respondent's height in feet is ^HEIGHTFT? Please verify.

2025 National Health Interview Survey (NHIS) Questionnaire

BMI: Current pregnancy, height, weight

Question ID: BMI.0020.02.1 **Variable:** HEIGHTIN_A **Interview Module:** Adult **Content Type:** Annual Core

Question Text:

- * Enter inches.
- * Enter '0' if exactly ^HEIGHTFT feet tall.

Fills:

HEIGHTFT	Description	{Value of HEIGHTFT_A}
	Instruction	Fill value from Adult.BMI.HEIGHTFT_A

Response:

00	0 inches
01	1 inch
02	2 inches
03	3 inches
04	4 inches
05	5 inches
06	6 inches
07	7 inches
08	8 inches
09	9 inches
10	10 inches
11	11 inches
97	Refused
99	Don't Know

Universe:

Sample Adult 18+ and height is 2-7ft

Skip Instructions:

<0-11,RF,DK> [goto WEIGHTLB_A]

2025 National Health Interview Survey (NHIS) Questionnaire

BMI: Current pregnancy, height, weight

Question ID: BMI.0020.04.1 Variable: HEIGHTM_A Interview Module: Adult Content Type: Annual Core

Question Text:

How tall are you without shoes?

* Enter height in metric.

* If the height is given in centimeters, press '0' at meters and enter the measure in centimeters (241 centimeters maximum).

Fills:

Response:

0	0 meters
1	1 meter
2	2 meters
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who choose to give their height in metric measurements

Skip Instructions:

<0-2> [goto HEIGHTCM_A]
<RF,DK> [goto WEIGHTLB_A]

2025 National Health Interview Survey (NHIS) Questionnaire

BMI: Current pregnancy, height, weight

Question ID: BMI.0020.05.1 Variable: HEIGHTCM_A Interview Module: Adult Content Type: Annual Core

Question Text:

- * Enter centimeters.
- * Enter height in metric.
- * If ^SANAME's height is greater than 241 centimeters, enter 241.

Fills:

SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name

Response:

000-241	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adults 18+ who entered 0 to 2 meters for height

Skip Instructions:

<0-241,RF,DK> [goto WEIGHTLB_A]

2025 National Health Interview Survey (NHIS) Questionnaire

BMI: Current pregnancy, height, weight

Question ID: BMI.0030.01.1 Variable: WEIGHTLB_A Interview Module: Adult Content Type: Annual Core

Question Text:

^PREGWEIGH

* Enter M to record metric measurements.

* If ^SANAME's weight is less than 50 pounds, enter 50. If ^SANAME's weight is greater than 500 pounds, enter 500.

Fills:

PREGWEIGH	Description	How much did you weigh before your pregnancy?/How much do you weigh?
	Instruction	If GEN.SEX_FINAL=2 AND PREGNOW_A=1: "How much did you weigh before your pregnancy?" else: "How much do you weigh?"
SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name

Response:

050-500	Range of values
M	Answered in Metric
997	Refused
999	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

If WEIGHTLB_A lt 50 or WEIGHTLB_A gt 500 [goto ERR1_WEIGHTLB_A]
elseif ((GEN.SEX_FINAL[PX_A]=1 and (WEIGHTLB_A lt 113 or WEIGHTLB_A gt 316)) or (GEN.SEX_FINAL[PX_A]=2 and (WEIGHTLB_A lt 96 or WEIGHTLB_A gt 293)) or (GEN.SEX_FINAL[PX_A] IN (RF,DK) and (WEIGHTLB_A lt 96 or WEIGHTLB_A gt 316))) [goto ERR2_WEIGHTLB_A]

<50-500,RF,DK> [goto next section]

<M> [goto WEIGHTKG_A]

Hard Edit:

Check Text	Check Description	Check Text
ERR1_WEIGHTLB_A	SA weight pounds hard edit	{check ERR1_WEIGHTLB_A}
		Weight is out of range. Only "50-500" or "M" or "Don't know/Refused" allowed in this field.

Soft Edit:

Check Text	Check Description	Check Text
ERR2_WEIGHTLB_A	SA weight pounds soft edit	{signal ERR2_WEIGHTLB_A}
		Please verify that the weight was entered correctly. Probe only if necessary.

2025 National Health Interview Survey (NHIS) Questionnaire

BMI: Current pregnancy, height, weight

Question ID: BMI.0030.02.1 Variable: WEIGHTKG_A Interview Module: Adult Content Type: Annual Core

Question Text:

^PREGWEIGH

* Enter weight in kilograms.

* If ^SANAME's weight is less than 23 kilograms, enter 23. If ^SANAME's weight is greater than 226 kilograms, enter 226.

Fills:

PREGWEIGH	Description	How much did you weigh before your pregnancy?/How much do you weigh?
	Instruction	If GEN.SEX_FINAL=2 AND PREGNOW_A=1: "How much did you weigh before your pregnancy?" else: "How much do you weigh?"
SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name

Response:

023-226	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adults 18+ who chose to give their weight in metric measurements

Skip Instructions:

If WEIGHTKG_A lt 23 or WEIGHTKG_A gt 226 [goto ERR1_WEIGHTKG_A]
elseif ((GEN.SEX_FINAL[PX]=1 and (WEIGHTKG_A lt 51 or WEIGHTKG_A gt 143)) or (GEN.SEX_FINAL
[PX]=2 and (WEIGHTKG_A lt 43 or WEIGHTKG_A gt 133)) or (GEN.SEX_FINAL[PX] IN (RF,DK) and
(WEIGHTKG_A lt 43 or WEIGHTKG_A gt 143)))[goto ERR2_WEIGHTKG_A]

<23-226,RF,DK> [goto next section]

Hard Edit:

Check Text	Check Description	Check Text
ERR1_WEIGHTKG_A	SA weight KG hard edit	{check ERR1_WEIGHTKG_A} Weight is out of range (23-226). Please correct.

Soft Edit:

Check Text	Check Description	Check Text
ERR2_WEIGHTKG_A	SA weight KG soft edit	{signal ERR2_WEIGHTKG_A} Please verify that the weight was entered correctly. Probe only if necessary.

2025 National Health Interview Survey (NHIS) Questionnaire

WPH: Whole Person Health

Question ID: WPH.0010.00.3 Variable: WPHQOL_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

The next questions will ask you to rate different areas of your health.

How would you rate your quality of life, focusing on what matters most to you? Would you say excellent, very good, good, fair, or poor?

Fills:

Response:

1	Excellent
2	Very Good
3	Good
4	Fair
5	Poor
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> [goto WPHSOCFC_A]

2025 National Health Interview Survey (NHIS) Questionnaire

WPH: Whole Person Health

Question ID: WPH.0020.00.3 Variable: WPHSOCFC_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

How would you rate your social and family connections? Would you say excellent, very good, good, fair, or poor?

Fills:

Response:

1	Excellent
2	Very Good
3	Good
4	Fair
5	Poor
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> [goto WPHDIET_A]

2025 National Health Interview Survey (NHIS) Questionnaire

WPH: Whole Person Health

Question ID: WPH.0030.00.3 Variable: WPHDIET_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

In general, how healthy is your overall diet?

* **Read if necessary:** *Would you say excellent, very good, good, fair, or poor?*

Fills:

Response:

1	Excellent
2	Very Good
3	Good
4	Fair
5	Poor
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> [goto WPHPHYSA_A]

2025 National Health Interview Survey (NHIS) Questionnaire

WPH: Whole Person Health

Question ID: WPH.0040.00.3 Variable: WPHPHYSA_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

How would you rate your physical activity, compared with people in your age group?

* **Read if necessary:** *Would you say excellent, very good, good, fair, or poor?*

Fills:

Response:

1	Excellent
2	Very Good
3	Good
4	Fair
5	Poor
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> [goto WPHSTRESS_A]

2025 National Health Interview Survey (NHIS) Questionnaire

WPH: Whole Person Health

Question ID: WPH.0050.00.3 Variable: WPHSTRESS_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

How would you rate your ability to manage stress?

* **Read if necessary:** *Would you say excellent, very good, good, fair, or poor?*

Fills:

Response:

1	Excellent
2	Very Good
3	Good
4	Fair
5	Poor
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> [goto WPHSLEEP_A]

2025 National Health Interview Survey (NHIS) Questionnaire

WPH: Whole Person Health

Question ID: WPH.0060.00.3 Variable: WPHSLEEP_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

How would you rate your sleep?

* **Read if necessary:** *Would you say excellent, very good, good, fair, or poor?*

Fills:

Response:

1	Excellent
2	Very Good
3	Good
4	Fair
5	Poor
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> [goto WPHSPRT_A]

2025 National Health Interview Survey (NHIS) Questionnaire

WPH: Whole Person Health

Question ID: WPH.0070.00.3 Variable: WPHSPRT_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

How would you rate your ability to find meaning and purpose in your daily life?

* **Read if necessary:** *Would you say excellent, very good, good, fair, or poor?*

Fills:

Response:

1	Excellent
2	Very Good
3	Good
4	Fair
5	Poor
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> [goto WPHMANGH_A]

2025 National Health Interview Survey (NHIS) Questionnaire

WPH: Whole Person Health

Question ID: WPH.0080.00.3 Variable: WPHMANGH_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

How would you rate your ability to manage your health, focusing on aspects of your health that matter most to you?

* **Read if necessary:** *Would you say excellent, very good, good, fair, or poor?*

Fills:

Response:

1	Excellent
2	Very Good
3	Good
4	Fair
5	Poor
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

VIS: Vision

Question ID: VIS.0010.00.1 Variable: VISINTRO_A Interview Module: Adult Content Type: Annual Core

Question Text:

The next questions ask about difficulties you may have doing certain activities because of a health problem.

* Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto WEARGLSS_A]

2025 National Health Interview Survey (NHIS) Questionnaire

VIS: Vision

Question ID: VIS.0020.00.1 Variable: WEARGLSS_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you wear glasses or contact lenses?

* **Read if necessary:** *Persons who wear glasses to read or to do other occasional tasks should answer yes to this question.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto VISIONDF_A]

2025 National Health Interview Survey (NHIS) Questionnaire

VIS: Vision

Question ID: VIS.0030.00.1 Variable: VISIONDF_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you have difficulty ^AGLASSCNTS? Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?

Fills:

AGLASSCNTS	Description	seeing, even when wearing glasses or contact lenses/seeing
	Instruction	If WEARGLSS_A=1 fill "seeing, even when wearing glasses or contact lenses"; else fill "seeing"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

HEA: Hearing

Question ID: HEA.0010.00.1 Variable: HEARAIID_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you use a hearing aid?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [HEARAIIDFR_A]
<2,RF,DK> [HEARINGDF_A]

2025 National Health Interview Survey (NHIS) Questionnaire

HEA: Hearing

Question ID: HEA.0020.00.1 Variable: HEARAIDFR_A Interview Module: Adult Content Type: Annual Core

Question Text:

How often do you use your hearing aid(s)? Would you say all of the time, some of the time, rarely, or never?

Fills:

Response:

1	All of the time
2	Some of the time
3	Rarely
4	Never
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who use a hearing aid

Skip Instructions:

<1-4,RF,DK> [HEARINGDF_A]

2025 National Health Interview Survey (NHIS) Questionnaire

HEA: Hearing

Question ID: HEA.0030.00.1 Variable: HEARINGDF_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you have difficulty hearing^HEARAID? Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?

Fills:

HEARAID	Description	, even when using your hearing aid(s)
	Instruction	If HEARAID_A=1, fill: ", even when using your hearing aid (s)" else NO FILL

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0010.00.1 Variable: DIFF_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you have difficulty walking or climbing steps? Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?

Fills:

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto EQUIP_A]

2025 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0020.00.1 Variable: EQUIP_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you use any equipment or receive help for getting around?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto CANEWLKR_A]
<2,RF,DK> [goto WLK100_A]

2025 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0030.00.1 Variable: WLK100_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you have difficulty walking 100 yards on level ground, that would be about the length of one football field or one city block? Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?

Fills:

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who do not use equipment or receive help for getting around or refused or don't know

Skip Instructions:

<1-3,RF,DK> [goto WLK13M_A]
<4> [goto STEPS_A]

2025 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0040.00.1 Variable: WLK13M_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you have difficulty walking a third of a mile on level ground, that would be the length of five football fields or five city blocks?

* **Read if necessary:** *Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?*

Fills:

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have no difficulty, some difficulty, or a lot of difficulty walking 100 yards or refused or don't know

Skip Instructions:

<1-4,RF,DK> [goto STEPS_A]

2025 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0050.00.1 Variable: STEPS_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you have difficulty walking up or down 12 steps?

* **Read if necessary:** *Would you say no difficulty, some difficulty, a lot of difficulty, you cannot do this at all?*

Fills:

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who do not use equipment or receive help for getting around or refused or don't know

Skip Instructions:

<1-4,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0060.00.1 Variable: CANEWLKR_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you use any of the following...

...Cane or walker?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who use equipment or receive help for getting around

Skip Instructions:

<1,2,RF,DK> [goto WCHAIR_A]

2025 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0070.00.1 Variable: WCHAIR_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** *Do you use any of the following?*

...Wheelchair or scooter?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who use equipment or receive help for getting around

Skip Instructions:

<1,2,RF,DK> [goto PERASST_A]

2025 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0080.00.1 Variable: PERASST_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** *Do you use any of the following?*

...Someone's assistance?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who use equipment or receive help for getting around

Skip Instructions:

<1,2,RF,DK> [goto NOEQWLK100_A]

2025 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0090.00.1 Variable: NOEQWLK100_A Interview Module: Adult Content Type: Annual Core

Question Text:

WITHOUT THE USE OF YOUR AID, do you have difficulty walking 100 yards on level ground, that would be about the length of one football field or one city block? Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?

Fills:

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who use equipment or receive help for getting around

Skip Instructions:

<1-3,RF,DK> [goto NOEQWLK13M_A]
<4> [goto NOEQSTEPS_A]

2025 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0100.00.1 Variable: NOEQWLK13M_A Interview Module: Adult Content Type: Annual Core

Question Text:

WITHOUT THE USE OF YOUR AID, do you have difficulty walking a third of a mile on level ground, that would be the length of five football fields or five city blocks?

* **Read if necessary:** *Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?*

Fills:

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have no difficulty, some difficulty, or a lot of difficulty walking 100 yards without the use of their aid or refused or don't know

Skip Instructions:

<1-4,RF,DK> [goto NOEQSTEPS_A]

2025 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0110.00.1 Variable: NOEQSTEPS_A Interview Module: Adult Content Type: Annual Core

Question Text:

WITHOUT THE USE OF YOUR AID, do you have difficulty walking up or down 12 steps?

* **Read if necessary:** *Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?*

Fills:

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who use equipment or receive help for getting around

Skip Instructions:

<1-4,RF,DK> if WCHAIR_A ne 1 [goto EQWLK100_A]
else [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0120.00.1 Variable: EQWLK100_A Interview Module: Adult Content Type: Annual Core

Question Text:

WHEN USING YOUR AID, do you have difficulty walking 100 yards on level ground, that would be about the length of one football field or one city block?

* **Read if necessary:** *Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?*

Fills:

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who use equipment or receive help for getting around but do not use a wheelchair or scooter or refused or don't know

Skip Instructions:

<1-3,RF,DK> [goto EQWLK13M_A]
<4> [goto EQSTEPS_A]

2025 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0130.00.1 Variable: EQWLK13M_A Interview Module: Adult Content Type: Annual Core

Question Text:

WHEN USING YOUR AID, do you have difficulty walking a third of a mile on level ground, that would be the length of five football fields or five city blocks?

* **Read if necessary:** *Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?*

Fills:

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have no difficulty, some difficulty, or a lot of difficulty walking 100 yards, when using their aid or refused or don't know

Skip Instructions:

<1-4,RF,DK> [goto EQSTEPS_A]

2025 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0140.00.1 Variable: EQSTEPS_A Interview Module: Adult Content Type: Annual Core

Question Text:

WHEN USING YOUR AID, do you have difficulty walking up or down 12 steps?

* **Read if necessary:** *Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?*

Fills:

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who use equipment or receive help for getting around but do not use a wheelchair or scooter

Skip Instructions:

<1-4,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

COM: Communication

Question ID: COM.0010.00.1 Variable: COMDIFF_A Interview Module: Adult Content Type: Annual Core

Question Text:

Using your usual language, do you have difficulty communicating, for example, understanding or being understood?

* **Read if necessary:** *Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?*

Fills:

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

COG: Cognition

Question ID: COG.0010.00.1 Variable: COGMEMDFF_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you have difficulty remembering or concentrating?

***Read if necessary:** *Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?*

Fills:

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,RF,DK> [goto next section]

<2-4> [goto COGTYPEDFF_A]

2025 National Health Interview Survey (NHIS) Questionnaire

COG: Cognition

Question ID: COG.0020.00.1 Variable: COGTYPEDFF_A Interview Module: Adult Content Type: Annual Core

Question Text:

Is that a difficulty with remembering, concentrating, or both?

Fills:

Response:

1	Difficulty remembering only
2	Difficulty concentrating only
3	Difficulty with both remembering and concentrating
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have some difficulty, a lot of difficulty, or are unable to remember or concentrate

Skip Instructions:

<1,3> [goto COGFRQDFF_A]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

COG: Cognition

Question ID: COG.0030.00.1 Variable: COGFRQDFF_A Interview Module: Adult Content Type: Annual Core

Question Text:

How often do you have difficulty remembering? Would you say sometimes, often, or all of the time?

Fills:

Response:

1	Sometimes
2	Often
3	All of the time
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have difficulty remembering or remembering and concentrating

Skip Instructions:

<1-3,RF,DK> [goto COGAMTDFF_A]

2025 National Health Interview Survey (NHIS) Questionnaire

COG: Cognition

Question ID: COG.0040.00.1 Variable: COGAMTDFD_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you have difficulty remembering a few things, a lot of things, or almost everything?

Fills:

Response:

1	A few things
2	A lot of things
3	Almost everything
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have difficulty remembering or remembering and concentrating

Skip Instructions:

<1-3,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

UPP: Self-care and Upper Body

Question ID: UPP.0010.00.1 Variable: UPPSLFCR_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you have difficulty with self care, such as washing all over or dressing? Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?

Fills:

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto UPPRAISE_A]

2025 National Health Interview Survey (NHIS) Questionnaire

UPP: Self-care and Upper Body

Question ID: UPP.0020.00.1 Variable: UPPRAISE_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you have difficulty raising a 2 liter bottle of water or soda from waist to eye level?

* **Read if necessary:** *Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?*

Fills:

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto UPPOBJCT_A]

2025 National Health Interview Survey (NHIS) Questionnaire

UPP: Self-care and Upper Body

Question ID: UPP.0030.00.1 Variable: UPP0BJCT_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you have difficulty using your hands and fingers, such as picking up small objects, for example, a button or pencil, or opening or closing containers or bottles?

**Read if necessary: Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?*

Fills:

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

SOC: Social Functioning

Question ID: SOC.0010.00.1 Variable: SOCERRNDS_A Interview Module: Adult Content Type: Annual Core

Question Text:

Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone such as visiting a doctor's office or shopping?

* **Read if necessary:** *Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?*

Fills:

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto SOCSCLPAR_A]

2025 National Health Interview Survey (NHIS) Questionnaire

SOC: Social Functioning

Question ID: SOC.0020.00.1 Variable: SOCSCCLPAR_A Interview Module: Adult Content Type: Annual Core

Question Text:

Because of a physical, mental, or emotional condition, do you have difficulty participating in social activities such as visiting friends, attending clubs and meetings, or going to parties?

* **Read if necessary:** *Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?*

Fills:

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto SOCWRKLIM_A]

2025 National Health Interview Survey (NHIS) Questionnaire

SOC: Social Functioning

Question ID: SOC.0030.00.1 Variable: SOCWRKLIM_A Interview Module: Adult Content Type: Annual Core

Question Text:

Are you limited in the kind OR amount of work you can do because of a physical, mental or emotional problem?

* **Read if necessary:** *Work includes paid work, volunteer work, school work, and homework.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

ADO: Age of Disability Onset

Question ID: ADO.0010.00.3 Variable: DEVDONSET_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

You said that you have difficulty with ^DIFF. Did ^THISDIFF begin before age 22?

Fills:

DIFF	Description	walking/climbing steps/walking or climbing steps/communicating/remembering/concentrating/remembering or concentrating/self-care/doing errands alone
	Instruction	if (MOB.WLK100_A IN (3,4) or MOB.WLK13M_A IN (3,4) or MOB.NOEQWLK100_A IN (3,4) or MOB.NOEQWLK13M_A IN (3,4)), then fill "walking" if (MOB.STEPS_A IN (3,4) or MOB.NOEQSTEPS_A IN (3,4)), then fill "climbing steps" if none of MOB.WLK100_A, MOB.WLK13M_A, MOB.NOEQWLK100_A, MOB.NOEQWLK13M_A, MOB.STEPS_A, or MOB.NOEQSTEPS_A = 3 or 4, but MOB.DIFF_A = 3 or 4, then fill "walking or climbing steps" If COM.COMDIFF_A IN (3,4), then fill "communicating" If COG.COGMEMDFF_A IN (3,4), If COG.COGTYPEDFF_A IN (1,3), then fill "remembering" If COG.COGTYPEDFF_A IN (2,3), then fill "concentrating" If COG.COGTYPEDFF_A IN (DK,RF), then fill "remembering or concentrating" If UPP.UPPSLFCR_A = 3 or 4, then fill "self-care" If SOC.SOCERRNDS_A = 3 or 4, then fill "doing errands alone" If more than two of the above are true, then separate the fills with commas and place an "and" before the last item. If two of the above are true, separate them with "and"
THISDIFF	Description	this difficulty/any of these difficulties
	Instruction	if ADO.countDIFF=1, fill "this difficulty" elseif ADO.countDIFF gt 1, fill "any of these difficulties"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults age 22+ who said they had a lot of difficulty or could not do the following activities at all: Walking or climbing stairs, communicating, remembering or concentrating, self-care, or doing errands alone

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0010.00.1 Variable: HICOV_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

The next questions are about health insurance. Include health insurance obtained through employment or purchased directly as well as government programs like Medicare, Medicaid, and the Children's Health Insurance Program that provide medical care or help pay medical bills. Are you covered by any kind of health insurance or some other kind of health care plan?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

```
<1,RF,DK> [goto HIKIND_A]
<2> if (GEN.AGE_FINAL[PX_A] ge 65 or Roster.HHC.tblAGE.blkPerson[PX_A].AGE65=2) [goto
MCAREPRB_A]
else [goto MCAIDPRB_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0020.00.1 Variable: HIKIND_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

What kinds of health insurance or health care coverage do you have? Is it...Private health insurance, Medicare, Medicare supplement, Medicaid, Children's Health Insurance Program or CHIP, military related health care including TRICARE, CHAMPUS, VA health care and CHAMP-VA, Indian Health Service, a state-sponsored health plan, or an other government program?

* Enter all that apply, separate with commas.

Fills:

Response:

01	Private health insurance
02	Medicare
03	Medigap
04	Medicaid
05	Children's Health Insurance Program (CHIP)
06	Military related health care: TRICARE (CHAMPUS) / VA health care / CHAMP-VA
07	Indian Health Service
08	State-sponsored health plan
09	Other government program
10	No coverage of any type
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ covered by any kind of health insurance or health care coverage or refused/don't know if they have insurance or health care coverage.

Skip Instructions:

```
if more than 1 answer selected and (10 IN HIKIND_A) [goto ERR1_HIKIND_A]
elseif (GEN.AGE_FINAL[PX_A] ge 65 or (GEN.AGE_FINAL[PX_A] IN (RF,DK) and
Roster.HHC.tblAGE.blkPerson[PX_A]=2) and 2 NOT IN HIKIND_A [goto MCAREPRB_A]
elseif (GEN.AGE_FINAL[PX_A] lt 65 or (GEN.AGE_FINAL[PX_A] IN (RF,DK) and
Roster.HHC.tblAGE.blkPerson[PX_A].AGE65 IN (1,RF,DK,empty)) and HIKIND_A IN (10,RF,DK) [goto
MCAIDPRB_A]
else [goto SINCOVDE_A]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR1_HIKIND_A	Selecting no coverage and other categories hard edit	{check ERR1_HIKIND_A}
		Cannot mark "no coverage of any kind" and another type. Please correct.

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0030.00.1 Variable: MCAREPRB_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Are you covered by Medicare?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 65+ who have not indicated they had Medicare in HIKIND_A

Skip Instructions:

<1,2,RF,DK> [goto SINCOVDE_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0040.00.1 Variable: MCAIDPRB_A Interview Module: Adult Content Type: Annual Core

Question Text:

[F1]

There is a program called Medicaid that pays for health care for persons in need. ^STATEMA Are you covered by Medicaid?

Fills:

STATEMA	Description	In ^STATENAME it is also called ^STMEDICAID.
	Instruction	if STMEDICAID ne empty, fill: "In ^STATENAME it is also called ^STMEDICAID." else fill: blank
STATENAME	Description	State name
	Instruction	If ST=AL, fill: Alabama else if ST=AK, fill: Alaska else if ST=AR, fill: Arkansas else if ST=AZ, fill: Arizona else if ST=CA, fill: California else if ST=CO, fill: Colorado else if ST=CT, fill: Connecticut else if ST=DE, fill: Delaware else if ST=DC, fill: District of Columbia else if ST=FL, fill: Florida else if ST=GA, fill: Georgia else if ST=HI, fill: Hawaii else if ST=ID, fill: Idaho else if ST=IL, fill: Illinois else if ST=IN, fill: Indiana else if ST=IA, fill: Iowa else if ST=KS, fill: Kansas else if ST=KY, fill: Kentucky else if ST=LA, fill: Louisiana else if ST=ME, fill: Maine else if ST=MD, fill: Maryland else if ST=MA, fill: Massachusetts else if ST=MI, fill: Michigan else if ST=MN, fill: Minnesota else if ST=MS, fill: Mississippi else if ST=MO, fill: Missouri else if ST=MT, fill: Montana else if ST=NE, fill: Nebraska else if ST=NV, fill: Nevada else if ST=NH, fill: New Hampshire else if ST=NJ, fill: New Jersey else if ST=NM, fill: New Mexico else if ST=NY, fill: New York else if ST=NC, fill: North Carolina else if ST=ND, fill: North Dakota else if ST=OH, fill: Ohio else if ST=OK, fill: Oklahoma else if ST=OR, fill: Oregon else if ST=PA, fill: Pennsylvania else if ST=RI, fill: Rhode Island else if ST=SC, fill: South Carolina else if ST=SD, fill: South Dakota else if ST=TN, fill: Tennessee else if ST=TX, fill: Texas else if ST=UT, fill: Utah else if ST=VT, fill: Vermont else if ST=VA, fill: Virginia else if ST=WA, fill: Washington else if ST=WV, fill: West Virginia else if ST=WI, fill: Wisconsin else if ST=WY, fill: Wyoming
STMEDICAID	Description	State Medicaid name

	Instruction	If AL then fill "Alabama Coordinated Health Network (ACHN)" If AK then fill "Denali KidCare" If AZ then fill "Arizona Health Care Cost Containment System (AHCCCS)" If AR then fill "ARKidsFirst; ARHOME; Provider-Led Arkansas Shared Savings Entity (PASSE)" If CA then fill "Medi-Cal" If CO then fill "Health First Colorado" If CT then fill "HUSKY Health" If DC then fill "DC Medicaid; DC Healthy Families" If DE then fill "Diamond State Health Plan (DSHP)" If FL then fill "FL Statewide Medicaid Managed Care (SMMC)" If GA then fill "Peach State Health Plan (Peach State); Georgia Families" If HI then fill "Med-QUEST; QUEST Integration" If ID then fill "Healthy Connections" If IL then fill "Medical Assistance; Family Care; HealthChoice Illinois" If IN then fill "Healthy Indiana Plan (HIP); Hoosier Healthwise; Hoosier Care Connect" If IA then fill "IA Health Link; Iowa Health and Wellness Plan (IHAWP)" If KS then fill "KanCare; Kansas Medical Assistance Program (KMAP); OneCare Kansas" If KY then fill "Kentucky Medicaid; KYHealth card" If LA then fill "Healthy Louisiana" If ME then fill "MaineCare" If MD then fill "HealthChoice" If MA then fill "MassHealth" If MI then fill "Healthy Michigan Plan (HMP)" If MN then fill "Medical Assistance (MA)" If MS then fill "MississippiCAN" If MO then fill "MO Healthnet" If MT then fill "Montana Medicaid; Healthy Montana Kids Plus (HMK Plus)" If NC then fill "NC Medicaid Managed Care; Children and Families Specialty Plan" If ND then fill "North Dakota (ND) Medicaid" If NE then fill "Heritage Health" If NH then fill "NH Medicaid; Medical Assistance Program" If NJ then fill "NJ Family Care" If NM then fill "Centennial Care" If NV then fill "Nevada Medicaid (NVMedicaid)" If NY then fill "New York Medicaid Choice" If OH then fill "Next Generation Program" If OK then fill "SoonerCare; SoonerSelect" If OR then fill "Oregon Health Plan (OHP)" If PA then fill "Medical Assistance (MA); HealthChoices" If RI then fill "RIte Care" If SC then fill "Healthy Connections" If SD then fill "South Dakota Medicaid Assistance" If TN then fill "TennCare" If TX then fill "State of Texas Access Reform (STAR); STAR +PLUS; STAR Kids" If UT then fill "Utah Medicaid; Utah Medicaid Integrated Care (UMIC)" If VT then fill "Green Mountain Care (Vermont Medicaid); Dr. Dynasaur" If VA then fill "Virginia Cardinal Care" If WA then fill "Apple Health" If WV then fill "West Virginia State Medicaid Plan; Mountain Health Trust (MHT)" If WI then fill "ForwardHealth; BadgerCare Plus" If WY then fill "Wyoming Medicaid State Plan; WYhealth"

Response :

1	Yes
2	No

7	Refused
9	Don't Know

Universe:

Sample Adults 18-64 who have indicated they are uninsured, refused, or don't know their type of health insurance

Skip Instructions:

<1,2,RF,DK> [goto SINCOVDE_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0050.00.1 Variable: SINCOVDE_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

^INADDITIONARE you covered by a SEPARATE plan that only pays for dental services?

Fills:

INADDITIONARE	Description	In addition to ^HITYPEANOSS, are/Are
	Instruction	If (HIKIND_A=1-9 or MCAREPRB_A=1 or MCAIDPRB_A=1), fill "In addition to ^HITYPEANOSS, are" else fill "Are"
HITYPEANOSS	Description	Type of health care plans without single service plans
	Instruction	fill coverage types from HIKIND_A, except HIKIND_A=10, HIKIND_A=1 fill: "private health insurance" HIKIND_A=2 fill: "Medicare" HIKIND_A=3 fill: "Medicare Supplement or Medigap" HIKIND_A=4 fill: "Medicaid" HIKIND_A=5 fill: "Children's Health Insurance Program (CHIP)" HIKIND_A=6 fill: "military related health care" HIKIND_A=7 fill: "Indian Health Service" HIKIND_A=8 fill: "a state-sponsored health plan" HIKIND_A=9 fill: "an other government program" if MCAREPRB_A=1, fill "Medicare" if MCAIDPRB_A=1, fill "Medicaid" separate choices with a comma and seperate the last two choices with "and"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto SINCOVVS_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0060.00.1 Variable: SINCOVVS_A Interview Module: Adult Content Type: Annual Core

Question Text:

[F1]

Are you covered by a SEPARATE plan that only pays for vision services?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto SINCOVRX_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0070.00.1 Variable: SINCOVRX_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Are you covered by a SEPARATE plan that only pays for prescriptions?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto HICHANGE_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0080.00.1 Variable: HICHANGE_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

I have recorded you are ^COVEREDA. Is this correct?

Fills:

COVEREDA	Description	not covered by health insurance/covered by ^HITYPEA
	Instruction	if HIKIND_A=10,R,D and (MCAIDPRB_A=2,R,D or MCAREPRB_A=2,R,D) and SINCOVDE_A=2,R,D and SINCOVVS_A=2,R,D and SINCOVRX_A=2,R,D fill: "not covered by health insurance" else fill: "covered by ^HITYPEA"
HITYPEA	Description	Type of health care plans with single service plans
	Instruction	fill coverage types from HIKIND_A, except HIKIND_A=10, HIKIND_A=1 fill: "private health insurance" HIKIND_A=2 fill: "Medicare" HIKIND_A=3 fill: "Medicare Supplement or Medigap" HIKIND_A=4 fill: "Medicaid" HIKIND_A=5 fill: "Children's Health Insurance Program (CHIP)" HIKIND_A=6 fill: "military related health care" HIKIND_A=7 fill: "Indian Health Service" HIKIND_A=8 fill: "a state-sponsored health plan" HIKIND_A=9 fill: "an other government program" if MCAREPRB_A=1, fill "Medicare"; if MCAIDPRB_A=1, fill "Medicaid" If SINCOVDE_A=1 and SINCOVRX_A=2,RF,DK and SINCOVVS_A=2,RF,DK, fill: "a single service dental plan" If SINCOVDE_A=2,RF,DK and SINCOVRX_A=1 and SINCOVVS_A=2,RF,DK, fill: "a single service prescription plan" If SINCOVDE_A=2,RF,DK and SINCOVRX_A=2,RF,DK and SINCOVVS_A=1, fill: "a single service vision plan" If SINCOVDE_A=1 and SINCOVRX_A=1 and SINCOVVS_A=2,RF,DK, fill: "single service dental and prescription plans" If SINCOVDE_A=1 and SINCOVRX_A=2,RF,DK and SINCOVVS_A=1, fill: "single service dental and vision plans" If SINCOVDE_A=2,RF,DK and SINCOVRX_A=1 and SINCOVVS_A=1, fill: "single service vision and prescription plans" If SINCOVDE_A=1 and SINCOVRX_A=1 and SINCOVVS_A=1, fill: "single service dental, vision and prescription plans" separate choices with a comma and seperate the last two choices with "and"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

```
<1,RF,DK>
if 02 in HIKIND_A or MCAREPRB_A=1[goto MCPART_A]
else if 04 in HIKIND_A or MCAIDPRB_A=1[goto MACHMN_A]
else if 01 in HIKIND_A [goto SET_INSPRI_FLAG]
else if 03 in HIKIND_A [goto SET_INSPRI_FLAG]
else if 05 in HIKIND_A [goto CHNAME_A]
else if 08 in HIKIND_A [goto OPNAME_A]
else if 09 in HIKIND_A [goto OGNAME_A]
else if 06 in HIKIND_A [goto MILSPC_A]
else if 07 in HIKIND_A [goto HINOTYR_A]
else if 10 in HIKIND_A and (MCAIDPRB_A IN (2,RF,DK) or MCAREPRB_A IN (2,RF,DK))[goto HILAST_A]
else [goto FINISH_A]
<2> [goto ERR1_HICHANGE_A]
```

Soft Edit:

Check Text	Check Description	Check Text
ERR1_HICHANGE_A	Answered health insurance coverage is incorrect	{signal ERR1_HICHANGE_A} Suppress this error to go back to HIKIND_A and update coverage. Close this error to change your answer to HICHANGE_A.

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0090.00.1 Variable: MCPART_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

What type of Medicare coverage do you have? Is it Part A - hospital insurance, Part B - medical insurance, or both?

Fills:

Response:

1	Part A- hospital only
2	Part B- medical only
3	Both Part A and Part B
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with Medicare

Skip Instructions:

<1> [goto MCPARTD_A]

<2-3,RF,DK> [goto MCCHOICE_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0100.00.1 Variable: MCCHOICE_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Are you enrolled in a Medicare Advantage plan?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with Medicare that have part B Medicare or don't know or refused if they have part B Medicare

Skip Instructions:

<1,2,RF,DK> [goto MCHMO_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0110.00.1 Variable: MCHMO_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Are you under a Medicare managed care arrangement, such as an HMO, that is, a Health Maintenance Organization?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with Medicare that have part B Medicare or don't know or refused if they have part B Medicare

Skip Instructions:

```
<1> [goto MCANAME_A]
<2,RF,DK> if MCCHOICE_A=1 [goto MCANAME_A]
elseif MCCHOICE_A IN (2,RF,DK) [goto MCPARTD_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0120.00.1 Variable: MCANAME_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

What is the name of your Medicare Advantage or Medicare HMO plan?

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ with a Medicare Advantage plan or a Medicare managed care arrangement

Skip Instructions:

<allow 80,RF,DK> [goto MCDNCOV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0121.00.1 Variable: MCDNCOV_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Does ^MEDADVNAME_A pay for any of the costs for dental care?

Fills:

MEDADVNAME_A	Description	{value of MCANAME_A}
	Instruction	If MCANAME_A=RESPONSE, fill value of MCANAME_A elseif MCANAME_A IN (DK,RF), fill: "this Medicare Advantage or Medicare HMO plan"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a Medicare Advantage plan or a Medicare managed care arrangement

Skip Instructions:

<1,2,RF,DK> [goto MCVSCOV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0122.00.1 Variable: MCVSCOV_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Does ^MEDADVNAME_A pay for any of the costs for routine vision care, such as glasses and contact lenses?

Fills:

MEDADVNAME_A	Description	{value of MCANAME_A}
	Instruction	If MCANAME_A=RESPONSE, fill value of MCANAME_A elseif MCANAME_A IN (DK,RF), fill: "this Medicare Advantage or Medicare HMO plan"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a Medicare Advantage plan or a Medicare managed care arrangement

Skip Instructions:

<1,2,RF,DK> [goto MCPARTD_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0130.00.1 Variable: MCPARTD_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Are you enrolled in Medicare Part D, also known as the Medicare Prescription Drug Plan?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with Medicare

Skip Instructions:

```
<1,2,RF,DK>
if 04 in HIKIND_A or MCAIDPRB_A=1 [goto MACHMN_A]
elseif 01 in HIKIND_A [goto SET_INSPRI_FLAG]
elseif 03 in HIKIND_A [goto SET_INSPRI_FLAG]
elseif 05 in HIKIND_A [goto CHNAME_A]
elseif 08 in HIKIND_A [goto OPNAME_A]
elseif 09 in HIKIND_A [goto OGNAME_A]
elseif 06 in HIKIND_A [goto MILSPC_A]
else [goto HINOTYR_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0140.00.1 Variable: MACHMN_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

The next questions are about Medicaid coverage. What is the name of your Medicaid health plan?

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ with Medicaid coverage

Skip Instructions:

<allow 80,RF,DK> [goto MAXCHNG_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0150.00.1 Variable: MAXCHNG_A Interview Module: Adult Content Type: Annual Core

Question Text:

[F1]

Was your Medicaid obtained through Healthcare.gov or the ^MARKETPLACE?

Fills:

MARKETPLACE	Description	Health Insurance marketplace names
	Instruction	If no state specified below, fill "Health Insurance Marketplace" If state specified below fill: If CA then fill "Health Insurance Marketplace, such as Covered California" If CO then fill "Health Insurance Marketplace, such as Connect for Health Colorado" If CT then fill "Health Insurance Marketplace, such as Access Health CT" If DC then fill "Health Insurance Marketplace, such as DC Health Link" If ID then fill "Health Insurance Marketplace, such as Your Health Idaho" If KY then fill "Health Insurance Marketplace, such as Kynect" If MA then fill "Health Insurance Marketplace, such as Massachusetts Health Connector" If ME then fill "Health Insurance Marketplace, such as CoverME" If MD then fill "Health Insurance Marketplace, such as Maryland Health Connection" If MN then fill "Health Insurance Marketplace, such as MNSure" If NJ then fill "Health Insurance Marketplace, such as GetCoveredNJ" If NV then fill "Health Insurance Marketplace, such as Nevada Health Link" If NM then fill "Health Insurance Marketplace, such as beWellnm" If NY then fill "Health Insurance Marketplace, such as NY State of Health" If PA then fill "Health Insurance Marketplace, such as Pennie" If RI then fill "Health Insurance Marketplace, such as HealthSource RI" If VA then fill "Health Insurance Marketplace, such as Virginia's Insurance Marketplace" If VT then fill "Health Insurance Marketplace, such as Vermont Health Connect" If WA then fill "Health Insurance Marketplace, such as Washington Healthplanfinder"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with Medicaid coverage

Skip Instructions:

<1,2,RF,DK> [goto MAPREM_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0160.00.1 Variable: MAPREM_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

A health insurance premium is the amount you or a family member pay each month for health care coverage. Do you or a family member pay a premium for this Medicaid plan?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with Medicaid coverage

Skip Instructions:

<1,2,RF,DK> [goto MADEDUC_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0170.00.1 Variable: MADEDUC_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

A deductible is the amount you have to pay for health care before your health insurance or health coverage plan will start paying your medical bills. Does your Medicaid plan have an annual deductible?

* **Read if necessary:** *A deductible is different from a copay (copayment).*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with Medicaid coverage

Skip Instructions:

```
<1> [goto MAHDHP_A]
<2,RF,DK>
if 01 in HIKIND_A [goto SET_INSPRI_FLAG]
else if 03 in HIKIND_A [goto SET_INSPRI_FLAG]
else if 05 in HIKIND_A [goto CHNAME_A]
else if 08 in HIKIND_A [goto OPNAME_A]
else if 09 in HIKIND_A [goto OGNAME_A]
else if 06 in HIKIND_A [goto MILSPC_A]
else [goto HINOTYR_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0180.00.1 Variable: MAHDHP_A Interview Module: Adult Content Type: Annual Core

Question Text:

[F1]

Is the annual deductible for medical care for this plan less than ^HDHPDED or ^HDHPDED or more?
If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.

Fills:

HDHPDED	Description	Deductible threshold (may change in future year)
	Instruction	Fill: \$1,650

Response:

1	Deductible is less than \$1,600
2	Deductible is \$1,600 or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with Medicaid coverage who have a deductible

Skip Instructions:

```
<1,2,RF,DK>
if 01 in HIKIND_A [goto SET_INSPRI_FLAG]
elseif 03 in HIKIND_A [goto SET_INSPRI_FLAG]
elseif 05 in HIKIND_A [goto CHNAME_A]
elseif 08 in HIKIND_A [goto OPNAME_A]
elseif 09 in HIKIND_A [goto OGNAME_A]
elseif 06 in HIKIND_A [goto MILSPC_A]
else [goto HINOTYR_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0270.00.1 Variable: PLANNAME1_A Interview Module: Adult Content Type: Annual Core

Question Text:

Earlier I recorded that ^SCNAME was covered by ^HIPNAM1_C. Are you covered by this same plan as ^SCNAME?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
HIPNAM1_C	Description	{Value of HIPNAM1_C}
	Instruction	Fill value from Child.INS.HIPNAM1_C

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage, where the Sample Child interview has already been conducted, the Sample Child is in the same family, and the Sample Child also had private health insurance, and the first private plan is not self only coverage, a plan name was not don't know or refused, and the source and who pays for the coverage is not don't know or refused.

Skip Instructions:

```
<1> if Child.INS.bPlan[1].POLHLD_C ne 1 [goto POLHLDA1_A]
elseif Child.INS.bPlan[1].POLHLD_C=1 [goto PRPOLHP1_A]
<2,RF,DK> if INSPRI2_FLG2_A=1 and INSPRI2_FLG3_A=1 and INSPRI2_FLG4_A=1 and INSPRI2_FLG5_A=1 and
INSPRI_FLG=1 and SAMEFAM_FLG=1 and CHILD.INS.PLANNAME2_C=empty [goto PLANNAME2_A] else [goto
HIPNAM1_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0280.00.1 Variable: POLHLDA1_A Interview Module: Adult Content Type: Annual Core

Question Text:

[F1]

Health insurance plans are usually obtained in one person's name even if other family members are covered by that plan. That person is called the policyholder. Are you the policyholder for ^HIPNAM1_C?

Fills:

HIPNAM1_C	Description	{Value of HIPNAM1_C}
	Instruction	Fill value from Child.INS.HIPNAM1_C

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a shared private health plan with the Sample Child, where the child is not the policyholder for their first private plan or refused or don't know.

Skip Instructions:

```
<1> if INSPRI2_FLG2_A=1 and INSPRI2_FLG3_A=1 and INSPRI2_FLG4_A=1 and INSPRI2_FLG5_A=1 [goto
PLANNAME2_A]
else [goto MORPLAN_A]
<2,RF,DK> [goto PRPOLHP1_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0290.00.1 Variable: PRPOLHP1_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

How are you related to the policyholder for ^HIPNAM1_C? Are you the policyholder's child, spouse, former spouse, or are you related in some other way?

Fills:

HIPNAM1_C	Description	{Value of HIPNAM1_C}
	Instruction	Fill value from Child.INS.HIPNAM1_C

Response:

1	Child
2	Spouse
3	Former spouse
4	Some other relationship
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a shared private health plan with the Sample Child, where the Child is the policy holder or where the Sample Adult is not the policyholder for the first plan or refused or don't know.

Skip Instructions:

<1-4,RF,DK> if INSPRI2_FLG2_A=1 and INSPRI2_FLG3_A=1 and INSPRI2_FLG4_A=1 and INSPRI2_FLG5_A=1
 [goto PLANNAME2_A]
 else [goto MORPLAN_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0300.00.1 Variable: PLANNAME2_A Interview Module: Adult Content Type: Annual Core

Question Text:

Earlier I recorded that ^SCNAME was covered by a second plan: ^HIPNAM2_C. Are you covered by this same plan as ^SCNAME?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
HIPNAM2_C	Description	{Value of HIPNAM2_C}
	Instruction	Fill value from Child.INS.HIPNAM2_C

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage, where the Sample Child interview has already been conducted, the Sample Child is in the same family, and the Sample Child also had private health insurance, and listed two plans. The second private plan is not self only coverage, a plan name was not don't know or refused, and the source and who pays for the coverage is not don't know or refused.

Skip Instructions:

```
<1> if Child.INS.bPlan[2].POLHLD_C ne 1 [goto POLHLDA2_A],
if Child.INS.bPlan[2].POLHLD_C=1 [goto PRPOLHP2_A]
<2,RF,DK> if PLANNAME1_A IN(2,RF,DK,empty) [goto HIPNAM1_A]
else [goto MORPLAN_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0310.00.1 Variable: POLHLDA2_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

* **Read if necessary:** Health insurance plans are usually obtained in one person's name even if other family members are covered by that plan. That person is called the policyholder.

Are you the policyholder for ^HIPNAM2_C?

Fills:

HIPNAM2_C	Description	{Value of HIPNAM2_C}
	Instruction	Fill value from Child.INS.HIPNAM2_C

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a shared private health plan with the Sample Child, where the child is not the policyholder for their second private plan or refused or don't know.

Skip Instructions:

```
<1> if PLANNAME1_A IN (2,RF,DK,empty) [goto MORPLAN_A]
elseif 05 in HIKIND_A [goto CHNAME_A]
elseif 08 in HIKIND_A [goto OPNAME_A]
elseif 09 in HIKIND_A [goto OGNAME_A]
elseif 06 in HIKIND_A [goto MILSPC_A]
else [goto HINOTYR_A]
```

```
<2,RF,DK>[goto PRPOLHP2_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0320.00.1 **Variable:** PRPOLHP2_A **Interview Module:** Adult **Content Type:** Annual Core

Question Text:

?[F1]

How are you related to the policyholder for ^HIPNAM2_C? Are you the policyholder's child, spouse, former spouse, or are you related in some other way?

Fills:

HIPNAM2_C	Description	{Value of HIPNAM2_C}
	Instruction	Fill value from Child.INS.HIPNAM2_C

Response:

1	Child
2	Spouse
3	Former spouse
4	Some other relationship
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a shared private health plan with the Sample Child, where the Sample Child is the policy holder for the second plan or the Sample Adult is not the policyholder for the second plan or refused or don't know.

Skip Instructions:

```
<1-4,RF,DK> if PLANNAME1_A IN (2,RF,DK,empty) [goto MORPLAN_A]
elseif 05 in HIKIND_A [goto CHNAME_A]
elseif 08 in HIKIND_A [goto OPNAME_A]
elseif 09 in HIKIND_A [goto OGNAME_A]
elseif 06 in HIKIND_A [goto MILSPC_A]
else [goto HINOTYR_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0330.00.1 Variable: HIPNAM1_A Interview Module: Adult Content Type: Annual Core

Question Text:

[F1]

It is important that we record the complete and accurate name of each private health insurance plan. What is the COMPLETE name of your plan? Do NOT include plans that only provide extra cash while in the hospital or plans that pay for only one type of service such as long term care, accidents, or dental care.

* **Read if necessary:** *Do you have a health plan card or something with the plan name on it?*

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ enrolled in a Medigap plan or private health insurance and the sample adult did not share or refused or did not know if they shared or did not have a value for both of the two listed private plans for the sample child

Skip Instructions:

<allow 80,RF,DK> [goto MORPLAN_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0340.00.1 Variable: MORPLAN_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Are you covered by any other private health insurance plans?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ enrolled in a private health plan where the name of the plan was given or don't know or refused or the sample adult only shared one private plan with the Sample Child.

Skip Instructions:

```
<1> [goto HIPNAM2_A]
<2,RF,DK>
if (PLANNAME1_A=1 or PLANNAME2_A=1) then
  if 05 in HIKIND_A [goto CHNAME_A]
  elseif 08 in HIKIND_A [goto OPNAME_A]
  elseif 09 in HIKIND_A [goto OGNAME_A]
  elseif 06 in HIKIND_A [goto MILSPC_A]
  else [goto HINOTYR_A]
else [goto bPlan[1].POLHLD_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0350.00.1 Variable: HIPNAM2_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

What is the name of that private health insurance plan?

* **Read if necessary:** *Do you have a health plan card or something with the plan name on it?*

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ with a second private health insurance plan

Skip Instructions:

<allow 80,RF,DK> [goto bPlan[1].POLHLD_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0370.00.1 Variable: POLHLD_A Interview Module: Adult Content Type: Annual Core

Question Text:

[F1]

I am going to ask you some questions about ^FIRSTPLANA. Health insurance plans are usually obtained in one person's name even if other family members are covered by that plan. That person is called the policyholder. Are you the policyholder for ^THISPLANA?

Fills:

FIRSTPLANA	Description	this plan/this first plan/this ^HIPNAM1_A plan/this second plan/this ^HIPNAM2_A plan
	Instruction	if PlanNum=1 then if HIPNAM1_A IN (RF,DK) and HIPNAM2_A= empty fill: "this plan" elseif HIPNAM1_A IN (RF,DK) fill: "this first plan" else fill: "this ^HIPNAM1_A plan" if PlanNum=2 then if HIPNAM2_A IN (RF,DK) fill: "this second plan" else fill: "this ^HIPNAM2_A plan"
HIPNAM1_A	Description	{Value of HIPNAM1_A}
	Instruction	Fill value from Adult.INS.HIPNAM1_A
HIPNAM2_A	Description	{Value of HIPNAM2_A}
	Instruction	Fill value from Adult.INS.HIPNAM2_A
THISPLANA	Description	this plan/^HIPNAM1_A/^HIPNAM2_A
	Instruction	if PlanNum=1 then if HIPNAM1_A IN (RF,DK) fill: "this plan" else fill: "^HIPNAM1_A" if PlanNum=2 then if HIPNAM2_A IN (RF,DK) fill: "this plan" Else fill: "^HIPNAM2_A"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage where a plan name was given or refused or don't know.

Skip Instructions:

<1,RF,DK> [goto PRPLCOV_A]
<2> [goto PRPOLH_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0380.00.1 Variable: PRPLCOV_A Interview Module: Adult Content Type: Annual Core

Question Text:

Does this plan cover someone other than yourself?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage where a plan name was given or refused or don't know and where the Sample Adult is the policyholder or refused or don't know

Skip Instructions:

<1,2,RF,DK> [goto PLNWRK_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0390.00.1 Variable: PRPOLH_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

How are you related to the policyholder? Are you the policyholder's child, spouse, former spouse, or are you related in some other way?

Fills:

Response:

1	Child
2	Spouse
3	Former spouse
4	Some other relationship
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance who are not the policyholder

Skip Instructions:

<1-4,RF,DK> [goto PLNWRK_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0400.00.1 Variable: PLNWRK_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Which one of these categories best describes how this plan was obtained? Was it obtained through an employer or union, purchased directly, obtained through Healthcare.gov or the Affordable Care Act, also known as Obamacare, obtained through a state or local government or community program or obtained in some other way?

Fills:

Response:

1	Through an employer, union, or professional association
2	Purchased directly
3	Through Healthcare.gov or the Affordable Care Act, also known as Obamacare
4	Through a state or local government or community program
5	Other
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage where a plan name was given or refused or don't know

Skip Instructions:

<1,3> [goto PLNPAY_A]
<2,4,RF,DK> [goto PLNEXCHG_A]
<5> [goto PLNWKSP_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0410.00.1 Variable: PLNWKSP_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** *How was this plan obtained?*

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage where a plan name was given or refused or don't know and private health insurance coverage was obtained from an other source

Skip Instructions:

<allow 80,RF,DK> [goto PLNEXCHG_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0420.00.1 Variable: PLNEXCHG_A Interview Module: Adult Content Type: Annual Core

Question Text:

[F1]

Was the plan obtained through Healthcare.gov or the ^MARKETPLACE?

Fills:

MARKETPLACE	Description	Health Insurance marketplace names
	Instruction	If no state specified below, fill "Health Insurance Marketplace" If state specified below fill: If CA then fill "Health Insurance Marketplace, such as Covered California" If CO then fill "Health Insurance Marketplace, such as Connect for Health Colorado" If CT then fill "Health Insurance Marketplace, such as Access Health CT" If DC then fill "Health Insurance Marketplace, such as DC Health Link" If ID then fill "Health Insurance Marketplace, such as Your Health Idaho" If KY then fill "Health Insurance Marketplace, such as Kynect" If MA then fill "Health Insurance Marketplace, such as Massachusetts Health Connector" If ME then fill "Health Insurance Marketplace, such as CoverME" If MD then fill "Health Insurance Marketplace, such as Maryland Health Connection" If MN then fill "Health Insurance Marketplace, such as MNSure" If NJ then fill "Health Insurance Marketplace, such as GetCoveredNJ" If NV then fill "Health Insurance Marketplace, such as Nevada Health Link" If NM then fill "Health Insurance Marketplace, such as beWellnm" If NY then fill "Health Insurance Marketplace, such as NY State of Health" If PA then fill "Health Insurance Marketplace, such as Pennie" If RI then fill "Health Insurance Marketplace, such as HealthSource RI" If VA then fill "Health Insurance Marketplace, such as Virginia's Insurance Marketplace" If VT then fill "Health Insurance Marketplace, such as Vermont Health Connect" If WA then fill "Health Insurance Marketplace, such as Washington Healthplanfinder"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage where a plan name was given or refused or don't know that is directly purchased, or obtained through a state, local, government or community program, or obtained another way, or refused/don't know how obtained

Skip Instructions:

<1,2,RF,DK> [goto PLNPAY_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0430.00.1 Variable: PLNPAY_A Interview Module: Adult Content Type: Annual Core

Question Text:

Who pays for this health insurance plan?

* Enter all that apply, separate with commas.

Fills:

Response:

1	Self or family (living in the household)
2	Employer or union
3	Someone outside the household
4	Medicare
5	Medicaid
6	Other government program
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage where a plan name was given or refused or don't know.

Skip Instructions:

```
if <1> IN PLNPAY_A [goto HICOSTN_A]
else if <2-6> IN PLNPAY_A or PLNPAY_A IN (RF,DK)[goto PRDEDUC_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0440.00.1 Variable: HICOSTN_A Interview Module: Adult Content Type: Annual Core

Question Text:

[F1]

How much ^DOYOUFAM currently spend for health insurance premiums for ^FIRSTPLANA? Please include payroll deductions for premiums.

Fills:

DOYOUFAM	Description	do you/does your family
	Instruction	if PCNT_A=1 fill "do you", else fill "does your family"
FIRSTPLANA	Description	this plan/this first plan/this ^HIPNAM1_A plan/this second plan/this ^HIPNAM2_A plan
	Instruction	if PlanNum=1 then if HIPNAM1_A IN (RF,DK) and HIPNAM2_A= empty fill: "this plan" elseif HIPNAM1_A IN (RF,DK) fill: "this first plan" else fill: "this ^HIPNAM1_A plan" if PlanNum=2 then if HIPNAM2_A IN (RF,DK) fill: "this second plan" else fill: "this ^HIPNAM2_A plan"
HIPNAM1_A	Description	{Value of HIPNAM1_A}
	Instruction	Fill value from Adult.INS.HIPNAM1_A
HIPNAM2_A	Description	{Value of HIPNAM2_A}
	Instruction	Fill value from Adult.INS.HIPNAM2_A

Response:

00001-99995	Range of values
99997	Refused
99999	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage where a plan name was given or refused or don't know who paid for by self or family

Skip Instructions:

<20000-99995> [goto ERR1_HICOSTN_A]
<1-19999> [goto HICOSTT_A]
<RF,DK> [goto PRDEDUC_A]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_HICOSTN_A		{signal ERR1_HICOSTN_A}
		[^HICOSTN_A] is unusually high. Please verify. Make corrections if necessary.

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0440.02.1 Variable: HICOSTT_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

* Enter time period for premium payments.

Fills:

Response:

01	Once a week
02	Once every 2 weeks
03	Once a month
04	Twice a month
05	Every two months
06	Quarterly (every 3 months)
07	Once a year
08	Twice a year
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage where a plan name was given or refused or don't know who gave a premium amount.

Skip Instructions:

<1-8,RF,DK> [goto PRDEDUC_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0450.00.1 Variable: PRDEDUC_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

A deductible is the amount you have to pay for health care before your health insurance or health coverage plan will start paying your medical bills. Does this health plan have an annual deductible?

* **Read if necessary:** *A deductible is different from a copay (copayment).*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance plans where a plan name was given or refused or don't know.

Skip Instructions:

<1> [goto PRHDHP_A]
<2,RF,DK> [goto INTROCOV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0460.00.1 Variable: PRHDHP_A Interview Module: Adult Content Type: Annual Core

Question Text:

[F1]

Is the ^FAM_A annual deductible for medical care for this plan less than ^HDHPAMT_A, or ^HDHPAMT_A or more? If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.

Fills:

FAM_A	Description	family
	Instruction	if POLHLD_A=2 or PRPLCOV_A=1, fill 'family'. Else no fill.
HDHPAMT_A	Description	^HDHPDED_family/^HDHPDED
	Instruction	if POLHLD_A=2 or PRPLCOV_A=1, fill "^HDHPDED_family" Else fill "^HDHPDED"
HDHPDED_family	Description	Family deductible threshold (may change in future year)
	Instruction	Fill: \$3,300
HDHPDED	Description	Deductible threshold (may change in future year)
	Instruction	Fill: \$1,650

Response:

1	Less than ^HDHPAMT_A
2	^HDHPAMT_A or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage where a plan name was given or refused or don't know with a deductible

Skip Instructions:

<1> [goto INTROCOV_A]
<2,RF,DK> [goto HSAHRA_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0470.00.1 Variable: HSAHRA_A Interview Module: Adult Content Type: Annual Core

Question Text:

There are special accounts or funds that can be used to pay for medical expenses, sometimes referred to as Health Savings Accounts or HSAs, Health Reimbursement Accounts or HRAs, Personal Care accounts, Personal Medical funds, or Choice funds. These are DIFFERENT from Flexible Spending Accounts or FSAs. Is there one of these accounts or funds with this plan?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage where a plan name was given or refused or don't know with a high deductible

Skip Instructions:

<1,2,RF,DK> [goto INTROCOV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0475.00.1 Variable: INTROCOV_A Interview Module: Adult Content Type: Annual Core

Question Text:

The next three questions are about services ^FIRSTPLANA may cover.

* Enter '1' to continue.

Fills:

FIRSTPLANA	Description	this plan/this first plan/this ^HIPNAM1_A plan/this second plan/this ^HIPNAM2_A plan
	Instruction	if PlanNum=1 then if HIPNAM1_A IN (RF,DK) and HIPNAM2_A= empty fill: "this plan" elseif HIPNAM1_A IN (RF,DK) fill: "this first plan" else fill: "this ^HIPNAM1_A plan" if PlanNum=2 then if HIPNAM2_A IN (RF,DK) fill: "this second plan" else fill: "this ^HIPNAM2_A plan"
HIPNAM1_A	Description	{Value of HIPNAM1_A}
	Instruction	Fill value from Adult.INS.HIPNAM1_A
HIPNAM2_A	Description	{Value of HIPNAM2_A}
	Instruction	Fill value from Adult.INS.HIPNAM2_A

Response:

1	Enter 1 to Continue

Universe:

Sample Adults 18+ with private health insurance coverage where a plan name was given or refused or don't know

Skip Instructions:

<1> [goto PRRXCOV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0480.00.1 Variable: PRRXCOV_A Interview Module: Adult Content Type: Annual Core

Question Text:

Does ^FIRSTPLANA pay for any of the costs for medications prescribed by a doctor?

* **Read if necessary:** *Even if you have not used this benefit, please answer if this plan would cover at least some of the costs if you were prescribed medications.*

Fills:

FIRSTPLANA	Description	this plan/this first plan/this ^HIPNAM1_A plan/this second plan/this ^HIPNAM2_A plan
	Instruction	if PlanNum=1 then if HIPNAM1_A IN (RF,DK) and HIPNAM2_A= empty fill: "this plan" elseif HIPNAM1_A IN (RF,DK) fill: "this first plan" else fill: "this ^HIPNAM1_A plan" if PlanNum=2 then if HIPNAM2_A IN (RF,DK) fill: "this second plan" else fill: "this ^HIPNAM2_A plan"
HIPNAM1_A	Description	{Value of HIPNAM1_A}
	Instruction	Fill value from Adult.INS.HIPNAM1_A
HIPNAM2_A	Description	{Value of HIPNAM2_A}
	Instruction	Fill value from Adult.INS.HIPNAM2_A

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage where the name of the plan was given or refused or don't know

Skip Instructions:

<1,2,RF,DK> [goto PRDNCOV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0490.00.1 Variable: PRDNCOV_A Interview Module: Adult Content Type: Annual Core

Question Text:

Does ^FIRSTPLANA pay for any of the costs for dental care?

* **Read if necessary:** *Even if you have not used this benefit, please answer if this plan would cover at least some of the costs if you did have dental care.*

Fills:

FIRSTPLANA	Description	this plan/this first plan/this ^HIPNAM1_A plan/this second plan/this ^HIPNAM2_A plan
	Instruction	if PlanNum=1 then if HIPNAM1_A IN (RF,DK) and HIPNAM2_A= empty fill: "this plan" elseif HIPNAM1_A IN (RF,DK) fill: "this first plan" else fill: "this ^HIPNAM1_A plan" if PlanNum=2 then if HIPNAM2_A IN (RF,DK) fill: "this second plan" else fill: "this ^HIPNAM2_A plan"
HIPNAM1_A	Description	{Value of HIPNAM1_A}
	Instruction	Fill value from Adult.INS.HIPNAM1_A
HIPNAM2_A	Description	{Value of HIPNAM2_A}
	Instruction	Fill value from Adult.INS.HIPNAM2_A

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage where the plan name was given or refused or don't know.

Skip Instructions:

<1,2,RF,DK> [goto PRVSCOV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0500.00.1 Variable: PRVSCOV_A Interview Module: Adult Content Type: Annual Core

Question Text:

Does ^FIRSTPLANA pay for any of the costs for routine vision care, such as glasses and contact lenses?

* **Read if necessary:** *Even if you have not used this benefit, please answer if this plan would cover at least some of the costs if you did have vision care.*

Fills:

FIRSTPLANA	Description	this plan/this first plan/this ^HIPNAM1_A plan/this second plan/this ^HIPNAM2_A plan
	Instruction	if PlanNum=1 then if HIPNAM1_A IN (RF,DK) and HIPNAM2_A= empty fill: "this plan" elseif HIPNAM1_A IN (RF,DK) fill: "this first plan" else fill: "this ^HIPNAM1_A plan" if PlanNum=2 then if HIPNAM2_A IN (RF,DK) fill: "this second plan" else fill: "this ^HIPNAM2_A plan"
HIPNAM1_A	Description	{Value of HIPNAM1_A}
	Instruction	Fill value from Adult.INS.HIPNAM1_A
HIPNAM2_A	Description	{Value of HIPNAM2_A}
	Instruction	Fill value from Adult.INS.HIPNAM2_A

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with private health insurance coverage where a plan name was given or refused or don't know.

Skip Instructions:

```
<1,2,RF,DK> If there is another plan [goto bPlan for next plan]
elseif 05 in HIKIND_A [goto CHNAME_A]
elseif 08 in HIKIND_A [goto OPNAME_A]
elseif 09 in HIKIND_A [goto OGNAME_A]
elseif 06 in HIKIND_A [goto MILSPC_A]
else [goto HINOTYR_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0510.00.1 Variable: CHNAME_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Earlier I recorded that you are covered by the Children's Health Insurance Program or CHIP. What is the name of the plan?

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ with a CHIP plan

Skip Instructions:

<allow 80,RF,DK> [goto CHXCHNG_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0520.00.1 Variable: CHXCHNG_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Was your CHIP plan obtained through Healthcare.gov or the ^MARKETPLACE?

Fills:

MARKETPLACE	Description	Health Insurance marketplace names
	Instruction	If no state specified below, fill "Health Insurance Marketplace" If state specified below fill: If CA then fill "Health Insurance Marketplace, such as Covered California" If CO then fill "Health Insurance Marketplace, such as Connect for Health Colorado" If CT then fill "Health Insurance Marketplace, such as Access Health CT" If DC then fill "Health Insurance Marketplace, such as DC Health Link" If ID then fill "Health Insurance Marketplace, such as Your Health Idaho" If KY then fill "Health Insurance Marketplace, such as Kynect" If MA then fill "Health Insurance Marketplace, such as Massachusetts Health Connector" If ME then fill "Health Insurance Marketplace, such as CoverME" If MD then fill "Health Insurance Marketplace, such as Maryland Health Connection" If MN then fill "Health Insurance Marketplace, such as MNSure" If NJ then fill "Health Insurance Marketplace, such as GetCoveredNJ" If NV then fill "Health Insurance Marketplace, such as Nevada Health Link" If NM then fill "Health Insurance Marketplace, such as beWellnm" If NY then fill "Health Insurance Marketplace, such as NY State of Health" If PA then fill "Health Insurance Marketplace, such as Pennie" If RI then fill "Health Insurance Marketplace, such as HealthSource RI" If VA then fill "Health Insurance Marketplace, such as Virginia's Insurance Marketplace" If VT then fill "Health Insurance Marketplace, such as Vermont Health Connect" If WA then fill "Health Insurance Marketplace, such as Washington Healthplanfinder"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a CHIP plan

Skip Instructions:

<1,2,RF,DK> [goto CHPREM_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0530.00.1 Variable: CHPREM_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

A health insurance premium is the amount you or a family member pays each month for health care coverage. Do you or a family member pay a premium for this CHIP plan?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a CHIP plan

Skip Instructions:

<1,2,RF,DK> [goto CHDEDUC_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0540.00.1 Variable: CHDEDUC_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

A deductible is the amount you have to pay for health care before your health insurance or health coverage plan will start paying your medical bills. Does your CHIP plan have an annual deductible?

* **Read if necessary:** *A deductible is different from a copay (copayment).*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a CHIP plan

Skip Instructions:

```
<1> [goto CHHDHP_A]
<2,RF,DK> if 08 in HIKIND_A [goto OPNAME_A]
    elseif 09 in HIKIND_A [goto OGNAME_A]
    elseif 06 in HIKIND_A [goto MILSPC_A]
    else [goto HINOTYR_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0550.00.1 Variable: CHHDHP_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Is the annual deductible for medical care for this plan less than ^HDHPDED or ^HDHPDED or more?
If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.

Fills:

HDHPDED	Description	Deductible threshold (may change in future year)
	Instruction	Fill: \$1,650

Response:

1	Deductible is less than \$1,600
2	Deductible is \$1,600 or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have a CHIP plan deductible

Skip Instructions:

```
<1,2,RF,DK> if 08 in HIKIND_A [goto OPNAME_A]
elseif 09 in HIKIND_A [goto OGNAM_A]
elseif 06 in HIKIND_A [goto MILSPC_A]
else [goto HINOTYR_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0560.00.1 Variable: OPNAME_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Earlier I recorded that you are covered by a state-sponsored plan. What is the name of the plan?

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ with a state-sponsored plan

Skip Instructions:

<allow 80,RF,DK> [goto OPXCHNG_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0570.00.1 Variable: OPXCHNG_A Interview Module: Adult Content Type: Annual Core

Question Text:

[F1]

Was your state-sponsored plan obtained through Healthcare.gov or the ^MARKETPLACE?

Fills:

MARKETPLACE	Description	Health Insurance marketplace names
	Instruction	If no state specified below, fill "Health Insurance Marketplace" If state specified below fill: If CA then fill "Health Insurance Marketplace, such as Covered California" If CO then fill "Health Insurance Marketplace, such as Connect for Health Colorado" If CT then fill "Health Insurance Marketplace, such as Access Health CT" If DC then fill "Health Insurance Marketplace, such as DC Health Link" If ID then fill "Health Insurance Marketplace, such as Your Health Idaho" If KY then fill "Health Insurance Marketplace, such as Kynect" If MA then fill "Health Insurance Marketplace, such as Massachusetts Health Connector" If ME then fill "Health Insurance Marketplace, such as CoverME" If MD then fill "Health Insurance Marketplace, such as Maryland Health Connection" If MN then fill "Health Insurance Marketplace, such as MNSure" If NJ then fill "Health Insurance Marketplace, such as GetCoveredNJ" If NV then fill "Health Insurance Marketplace, such as Nevada Health Link" If NM then fill "Health Insurance Marketplace, such as beWellnm" If NY then fill "Health Insurance Marketplace, such as NY State of Health" If PA then fill "Health Insurance Marketplace, such as Pennie" If RI then fill "Health Insurance Marketplace, such as HealthSource RI" If VA then fill "Health Insurance Marketplace, such as Virginia's Insurance Marketplace" If VT then fill "Health Insurance Marketplace, such as Vermont Health Connect" If WA then fill "Health Insurance Marketplace, such as Washington Healthplanfinder"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a state-sponsored plan

Skip Instructions:

<1,2,RF,DK> [goto OPPREM_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0580.00.1 Variable: OPPREM_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

A health insurance premium is the amount you or a family member pays each month for health care coverage. Do you or a family member pay a premium for this state-sponsored plan?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a state-sponsored plan

Skip Instructions:

<1,2,RF,DK> [goto OPDEDUC_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0590.00.1 Variable: OPDEDUC_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

A deductible is the amount you have to pay for health care before your health insurance or health coverage plan will start paying your medical bills. Does your state-sponsored plan have an annual deductible?

* **Read if necessary:** *A deductible is different from a copay (copayment).*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a state-sponsored plan

Skip Instructions:

```
<1>[goto OPHDHP_A]
<2,RF,DK> if 09 in HIKIND_A [goto OGNAME_A]
    elseif 06 in HIKIND_A [goto MILSPC_A]
    else [goto HINOTYR_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0600.00.1 Variable: OPHDHP_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Is the annual deductible for medical care for this plan less than ^HDHPDED or ^HDHPDED or more?
If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.

Fills:

HDHPDED	Description	Deductible threshold (may change in future year)
	Instruction	Fill: \$1,650

Response:

1	Deductible is less than \$1,600
2	Deductible is \$1,600 or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a state-sponsored plan with a deductible

Skip Instructions:

```
<1,2,RF,DK> if 09 in HIKIND_A [goto OGNAME_A]
elseif 06 in HIKIND_A [goto MILSPC_A]
else [goto HINOTYR_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0610.00.1 Variable: OGNAME_A Interview Module: Adult Content Type: Annual Core

Question Text:

[F1]

Earlier I recorded that you are covered by an other government program. What is the name of the plan?

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who have an other government plan

Skip Instructions:

<allow 80,RF,DK> [goto OGXCHNG_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0620.00.1 Variable: OGXCHNG_A Interview Module: Adult Content Type: Annual Core

Question Text:

[F1]

Was your other government plan obtained through Healthcare.gov or the ^MARKETPLACE?

Fills:

MARKETPLACE	Description	Health Insurance marketplace names
	Instruction	If no state specified below, fill "Health Insurance Marketplace" If state specified below fill: If CA then fill "Health Insurance Marketplace, such as Covered California" If CO then fill "Health Insurance Marketplace, such as Connect for Health Colorado" If CT then fill "Health Insurance Marketplace, such as Access Health CT" If DC then fill "Health Insurance Marketplace, such as DC Health Link" If ID then fill "Health Insurance Marketplace, such as Your Health Idaho" If KY then fill "Health Insurance Marketplace, such as Kynect" If MA then fill "Health Insurance Marketplace, such as Massachusetts Health Connector" If ME then fill "Health Insurance Marketplace, such as CoverME" If MD then fill "Health Insurance Marketplace, such as Maryland Health Connection" If MN then fill "Health Insurance Marketplace, such as MNSure" If NJ then fill "Health Insurance Marketplace, such as GetCoveredNJ" If NV then fill "Health Insurance Marketplace, such as Nevada Health Link" If NM then fill "Health Insurance Marketplace, such as beWellnm" If NY then fill "Health Insurance Marketplace, such as NY State of Health" If PA then fill "Health Insurance Marketplace, such as Pennie" If RI then fill "Health Insurance Marketplace, such as HealthSource RI" If VA then fill "Health Insurance Marketplace, such as Virginia's Insurance Marketplace" If VT then fill "Health Insurance Marketplace, such as Vermont Health Connect" If WA then fill "Health Insurance Marketplace, such as Washington Healthplanfinder"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have an other government plan

Skip Instructions:

<1,2,RF,DK> [goto OGPREM_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0630.00.1 Variable: OGPREM_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

A health insurance premium is the amount you or a family member pays each month for health care coverage. Do you or a family member pay a premium for your other government plan?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have an other government plan

Skip Instructions:

<1,2,RF,DK> [goto OGDEDUC_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0640.00.1 Variable: OGDEDUC_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

A deductible is the amount you have to pay for health care before your health insurance or health coverage plan will start paying your medical bills. Does your other government plan have an annual deductible?

* **Read if necessary:** *A deductible is different from a copay (copayment).*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with an other government plan

Skip Instructions:

```
<1> [goto OGDHP_A]
<2,RF,DK> if 06 in HIKIND_A [goto MILSPC_A]
else [goto HINOTYR_A]
```


2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0650.00.1 Variable: OGHDP_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Is the annual deductible for medical care for this plan less than ^HDHPDED or ^HDHPDED or more?
If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.

Fills:

HDHPDED	Description	Deductible threshold (may change in future year)
	Instruction	Fill: \$1,650

Response:

1	Deductible is less than \$1,600
2	Deductible is \$1,600 or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with an other government plan with a deductible

Skip Instructions:

<1,2,RF,DK> if 06 in HIKIND_A [goto MILSPC_A]
else [goto HINOTYR_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0660.00.1 Variable: MILSPC_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Earlier I recorded that you are covered by military related health care. What types of military related health care are you covered by?

* Enter all that apply, separate with commas.

Fills:

Response:

1	VA health care
2	TRICARE (CHAMPUS)
3	CHAMP-VA (do not include CHAMPUS)
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with military related health care

Skip Instructions:

<1-3,RF,DK> [goto HINOTYR_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0670.00.1 Variable: HILAST_A Interview Module: Adult Content Type: Annual Core

Question Text:

How long has it been since you last had health care coverage that paid for doctor's visits or hospital stays?

Fills:

Response:

0	Never
1	Within the past year (anytime less than 12 months ago)
2	Within the last 2 years (1 year but less than 2 years ago)
3	Within the last 3 years (2 years but less than 3 years ago)
4	Within the last 5 years (3 years but less than 5 years ago)
5	Within the last 10 years (5 years but less than 10 years ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ without known health insurance and answered no, refused or don't know to the Medicaid probe or the Medicare probe.

Skip Instructions:

<1> [goto HILASTMY_A]
<2,3> [goto HISTOPJOB_A]
<4,5,6,0,RF,DK> [goto RSNHICOST_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0680.00.1 Variable: HILASTMY_A Interview Module: Adult Content Type: Annual Core

Question Text:

In the past 12 months, how many months were you without coverage?

* If less than 1 month, enter '1'.

Fills:

Response:

01-12	Range of values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ without known health insurance who last had insurance at some time within the last 12 months

Skip Instructions:

<1-12,RF,DK> [goto HISTOPJOB_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0690.00.1 Variable: HISTOPJOB_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

Think about the last time that you did have health care coverage that paid for doctor's visits or hospital stays. I am going to read a list of reasons why someone might no longer be enrolled in coverage. Please tell me, yes or no, if this is a reason why you are no longer enrolled in your last health care plan.

You or the policyholder retired, lost a job, or changed employers?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have been uninsured for less than 3 years

Skip Instructions:

<1,2,RF,DK> [goto HISTOPMISS_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0700.00.1 Variable: HISTOPMISS_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** *Are you no longer enrolled in your last health care plan because...*

You missed a deadline for signing up or paying for the coverage?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have been uninsured for less than 3 years

Skip Instructions:

<1,2,RF,DK> [goto HISTOPAGE_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0710.00.1 Variable: HISTOPAGE_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** *Are you no longer enrolled in your last health care plan because...*

You became ineligible because of your age or because you left school?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have been uninsured for less than 3 years

Skip Instructions:

<1,2,RF,DK> [goto HISTOPCOST_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0720.00.1 Variable: HISTOPCOST_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** *Are you no longer enrolled in your last health care plan because...*

The cost for your coverage increased?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have been uninsured for less than 3 years

Skip Instructions:

<1,2,RF,DK> [goto HISTOPELIG_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0730.00.1 Variable: HISTOPELIG_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

* **Read if necessary:** *Are you no longer enrolled in your last health care plan because...*

You had Medicaid or other public coverage, but were no longer eligible?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have been uninsured for less than 3 years

Skip Instructions:

<1,2,RF,DK> [goto RSNHICOST_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0740.00.1 Variable: RSNHICOST_A Interview Module: Adult Content Type: Annual Core

Question Text:

^INSREASONS Are you currently uninsured because coverage is not affordable?

Fills:

INSREASONS	Description	RSNHICOST_A Introduction
	Instruction	If HILAST_A IN (0,4,5,6,RF,DK) fill: "There are many reasons why people do not have health insurance coverage." If HILAST_A IN (1,2,3) fill: "We just discussed reasons you lost coverage. Now I am going to ask you some questions about why you haven't obtained coverage."

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ without known health insurance and answered no, refused or don't know to the Medicare probe or the Medicaid probe.

Skip Instructions:

<1,2,RF,DK> [goto RSNHIWANT_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0750.00.1 **Variable:** RSNHIWANT_A **Interview Module:** Adult **Content Type:** Annual Core

Question Text:

There are other reasons that people do not have health insurance coverage. ^PLUSCOSTA you currently uninsured because...

...you do not need or want coverage?

Fills:

PLUSCOSTA	Description	In addition to cost, are/Are
	Instruction	if RSNHICOST_A = 1 then fill "In addition to cost, are" Else fill "Are"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ without known health insurance and answered no, refused or don't know to the Medicare probe or the Medicaid probe.

Skip Instructions:

<1,2,RF,DK> [goto RSNHIELIG_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0760.00.1 Variable: RSNHIELIG_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** *There are other reasons that people do not have health insurance coverage.
^PLUSCOSTA you currently uninsured because...*

...you are not eligible for coverage?

Fills:

PLUSCOSTA	Description	In addition to cost, are/Are
	Instruction	if RSNHICOST_A = 1 then fill "In addition to cost, are" Else fill "Are"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ without known health insurance and answered no, refused or don't know to the Medicaid probe or the Medicare probe

Skip Instructions:

<1,2,RF,DK> [goto RSNHICONF_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0770.00.1 Variable: RSNHICONF_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** *There are other reasons that people do not have health insurance coverage.
^PLUSCOSTA you currently uninsured because...*

...the process of signing up for coverage is too difficult or confusing?

Fills:

PLUSCOSTA	Description	In addition to cost, are/Are
	Instruction	if RSNHICOST_A = 1 then fill "In addition to cost, are" Else fill "Are"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ without known health insurance and answered no, refused or don't know to the Medicaid probe or the Medicare probe

Skip Instructions:

<1,2,RF,DK> [goto RSNHIMEET_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0780.00.1 Variable: RSNHIMEET_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** *There are other reasons that people do not have health insurance coverage.
^PLUSCOSTA you currently uninsured because...*

...you cannot find a plan that meets your needs?

Fills:

PLUSCOSTA	Description	In addition to cost, are/Are
	Instruction	if RSNHICOST_A = 1 then fill "In addition to cost, are" Else fill "Are"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ without known health insurance and answered no, refused or don't know to the Medicaid probe or the Medicare probe

Skip Instructions:

<1,2,RF,DK> [goto RSNHIWAIT_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0790.00.1 Variable: RSNHIWAIT_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** *There are other reasons that people do not have health insurance coverage.
^PLUSCOSTA you currently uninsured because...*

...you applied for coverage but it has not started yet?

Fills:

PLUSCOSTA	Description	In addition to cost, are/Are
	Instruction	if RSNHICOST_A = 1 then fill "In addition to cost, are" Else fill "Are"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ without known health insurance and answered no, refused or don't know to the Medicare probe or the Medicaid probe

Skip Instructions:

<1,2,RF,DK> [goto RSNHIOTH_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0800.00.1 Variable: RSNHIOTH_A Interview Module: Adult Content Type: Annual Core

Question Text:

Is there another reason that you currently do not have health insurance coverage?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ without known health insurance and answered no, refused or don't know to the Medicare probe or the Medicaid probe

Skip Instructions:

<1> [goto RSNHIOTHSP_A]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0810.00.1 Variable: RSNHIOTHSP_A Interview Module: Adult Content Type: Annual Core

Question Text:

What is your other reason for not having coverage?

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who have another reason for not having coverage

Skip Instructions:

<allow 80,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0820.00.1 Variable: HINOTYR_A Interview Module: Adult Content Type: Annual Core

Question Text:

In the past 12 months, was there any time when you did NOT have ANY health insurance or coverage?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with known health insurance coverage or responded yes to the medicare probe or medicaid probe

Skip Instructions:

<1> [goto HINOTMYR_A]
<2,RF,DK> [goto FINISH_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0830.00.1 Variable: HINOTMYR_A Interview Module: Adult Content Type: Annual Core

Question Text:

In the past 12 months, about how many months were you without coverage?

* If less than 1 month, enter '1'.

Fills:

Response:

01-12	Range of values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ with known health insurance coverage and did not have health insurance for some period of time in the past 12 months

Skip Instructions:

<1-12,RF,DK> [goto FINISH_A]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0840.00.1 Variable: FINISH_A Interview Module: Adult Content Type: Annual Core

Question Text:

* The Sample Adult health insurance section is now complete.

* Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

PAY: Difficulty Paying for Health Care

Question ID: PAY.0010.00.1 Variable: PAYINTRO_A Interview Module: Adult Content Type: Annual Core

Question Text:

Now I am going to ask you about your medical bills. Include bills for doctors, dentists, hospitals, therapists, medication, equipment, and nursing home or home care.

^Dormfill

* Enter '1' to continue.

Fills:

Dormfill	Description	think about family living in family home
	Instruction	If Roster.HHC.tblNAME.bPerson[PX_A].ONOFFCAMPUS=1, fill "When I ask about your family, please think about your family living at ^HNO ^HNOSUF ^STRNAME." else leave blank
HNO	Description	{Value of HNO}
	Instruction	Fill GEN.HNO
HNOSUF	Description	{Value of HNOSUF}
	Instruction	Fill GEN.HNOSUF
STRNAME	Description	{Value of STRNAME}
	Instruction	Fill GEN.STRNAME

Response:

1	Enter 1 to Continue

Universe:

Sample Adults 18+ living in same family as the Sample Child when the Sample Child PAY section has not been completed
or Sample Adults living in same family as Sample Child when the Sample Child respondent is not the Sample Adult and the Sample Child respondent answered don't or refused to PAYBLL12M_C and PAYNOBLLNW_C
or Sample adults living in different families than the Sample Child

Skip Instructions:

<1> [goto PAYBLL12M_A]

Replicate To:

PAYINTRO_C

2025 National Health Interview Survey (NHIS) Questionnaire

PAY: Difficulty Paying for Health Care

Question ID: PAY.0020.00.1 Variable: PAYBLL12M_A Interview Module: Adult Content Type: Annual Core

Question Text:

In the past 12 months, did ^youanyone have problems paying or were unable to pay any medical bills?

* **Read if necessary:** *Include bills for doctors, dentists, hospitals, therapists, medication, equipment, nursing home or home care.*

Fills:

youanyone	Description	you/anyone in the family
	Instruction	If GEN.PCNT_A=1 fill "you"; else fill "anyone in the family"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ living in same family as the Sample Child when the Sample Child PAY section has not been completed
or Sample Adults living in same family as Sample Child when the Sample Child respondent is not the Sample Adult and the Sample Child respondent answered don't or refused to PAYBILL12M_C and PAYNOBLLNW_C
or Sample adults living in different families than the Sample Child

Skip Instructions:

<1,RF,DK> [goto PAYNOBLLNW_A]
<2> [goto PAYWORRY_A]

Replicate To:

PAYBLL12M_C

2025 National Health Interview Survey (NHIS) Questionnaire

PAY: Difficulty Paying for Health Care

Question ID: PAY.0030.00.1 Variable: PAYNOBLLNW_A Interview Module: Adult Content Type: Annual Core

Question Text:

^DoyouDoesanyoneinfam currently have any medical bills that you are unable to pay at all?

Fills:

DoyouDoesanyoneinfam	Description	Do you/Does anyone in your family
	Instruction	If GEN.PCNT_A=1 fill "Do you"; else fill "Does anyone in your family"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ where anyone in the family has difficulty playing medical bills or don't know or refused and Sample Adult is living in same family as the Sample Child when the Sample Child PAY section has not been completed
or Sample Adults living in same family as Sample Child when the Sample Child respondent is not the Sample Adult and the Sample Child respondent answered don't or refused to PAYBILL12M_C and PAYNOBLLNW_C
or Sample adults living in different families than the Sample Child AND who said they/anyone in their family has problems paying their medical bills or don't know or refuse to answer if they/anyone in their family has problems paying bills

Skip Instructions:

<1,2,RF,DK> [goto PAYWORRY_A]

Replicate To:

PAYNOBLLNW_C

2025 National Health Interview Survey (NHIS) Questionnaire

PAY: Difficulty Paying for Health Care

Question ID: PAY.0040.00.1 Variable: PAYWORRY_A Interview Module: Adult Content Type: Annual Core

Question Text:

If you get sick or have an accident, how worried are you that you will be able to pay your medical bills? Are you very worried, somewhat worried, or not at all worried?

Fills:

Response:

1	Very worried
2	Somewhat worried
3	Not at all worried
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-3,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

CVL: Long COVID

Question ID: CVL.0010.00.3 Variable: CVDINTRO_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

The next set of questions are about coronavirus or COVID-19.

* Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto EVERCOVID_A]

2025 National Health Interview Survey (NHIS) Questionnaire

CVL: Long COVID

Question ID: CVL.0020.00.3 Variable: EVERCOVID_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Have you ever had COVID-19?

* **Read if necessary:** *Include being told by a doctor or other health professional that you had or likely had COVID-19. Also include antibodies or blood tests as well as other forms of testing for COVID-19, such as a nasal swabbing or throat swabbing. Also include if you had close contact with someone who had COVID-19 and you had symptoms.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto LONGCOVID2_A]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

CVL: Long COVID

Question ID: CVL.0030.00.3 Variable: LONGCOVID2_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Did you have any symptoms lasting 3 months or longer that you did not have before having COVID-19?

Read if necessary: Long term symptoms may include tiredness or fatigue, difficulty thinking, concentrating, forgetfulness or memory problems, sometimes referred to as "brain fog," difficulty breathing or shortness of breath, joint or muscle pain, fast-beating or pounding heart (also known as heart palpitations), chest pain, dizziness on standing, smell or taste loss or alteration to smell or taste, ^menstrual and inability to exercise.

Fills:

menstrual	Description	menstrual changes
	Instruction	If GEN.SEX_FINAL=2,RF,DK and GEN.AGE_FINAL=9-58, fill "menstrual changes," else fill blank

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have ever had COVID-19

Skip Instructions:

<1> [goto SYMPNOW1_A]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

CVL: Long COVID

Question ID: CVL.0040.00.3 Variable: SYMPNOW1_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Do you have symptoms NOW?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have ever had COVID-19 and had symptoms lasting 3 months or longer

Skip Instructions:

<1> [goto LCVDACT_A]

<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

CVL: Long COVID

Question ID: CVL.0050.00.3 Variable: LCVDACT_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

How much do these long-term symptoms reduce your ability to carry out day-to-day activities compared with the time before you had COVID-19? Would you say not at all, a little, or a lot?

Fills:

Response:

1	Not at all
2	A little
3	A lot
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with COVID-19 symptoms lasting 3 months or longer that they did not have before having coronavirus or COVID-19 and they have symptoms now

Skip Instructions:

<1-3,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

DNC: Dental Care

Question ID: DNC.0010.00.2 Variable: DNCINTRO_A Interview Module: Adult Content Type: Rotating Core

Question Text:

These next questions ask about your dental care.

* Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto DENPREV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

DNC: Dental Care

Question ID: DNC.0020.00.2 Variable: DENPREV_A Interview Module: Adult Content Type: Rotating Core

Question Text:

About how long has it been since you last had a dental examination or cleaning?

* **Read if necessary:** Include cleanings from all types of dental care providers such as dentists, orthodontists, oral surgeons, dental hygienists, and all other dental specialists.

Fills:

Response:

0	Never
1	Within the past year (anytime less than 12 months ago)
2	Within the last 2 years (1 year but less than 2 years ago)
3	Within the last 3 years (2 years but less than 3 years ago)
4	Within the last 5 years (3 years but less than 5 years ago)
5	Within the last 10 years (5 years but less than 10 years ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<0-6,RF,DK> [goto DENDL12M_A]

2025 National Health Interview Survey (NHIS) Questionnaire

DNC: Dental Care

Question ID: DNC.0030.00.2 Variable: DENDL12M_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 12 months, have you DELAYED getting dental care because of the cost?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto DENNG12M_A]

2025 National Health Interview Survey (NHIS) Questionnaire

DNC: Dental Care

Question ID: DNC.0040.00.2 Variable: DENNG12M_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 12 months, was there any time when you needed dental care, but DID NOT GET IT because of the cost?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0010.00.1 Variable: UTZINTRO_A Interview Module: Adult Content Type: Annual Core

Question Text:

Now, I would like to ask you about your health care, not including dental care.

* Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto LASTDR_A]

2025 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0020.00.1 Variable: LASTDR_A Interview Module: Adult Content Type: Annual Core

Question Text:

About how long has it been since you last saw a doctor or other health professional about your health?

* **Read if necessary:** *Do not include appointments by video or phone.*

* **Read if necessary:** *Include doctors seen while a patient in a hospital.*

* **Read if necessary:** *Do not include dental care.*

Fills:

Response:

0	Never
1	Within the past year (anytime less than 12 months ago)
2	Within the last 2 years (1 year but less than 2 years ago)
3	Within the last 3 years (2 years but less than 3 years ago)
4	Within the last 5 years (3 years but less than 5 years ago)
5	Within the last 10 years (5 years but less than 10 years ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-6> [goto WELLNESS_A]

<0,RF,DK> [goto USUALPL_A]

2025 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0030.00.1 Variable: WELLNESS_A Interview Module: Adult Content Type: Annual Core

Question Text:

Was this a wellness visit, physical, or general purpose check-up?

* **Read if necessary:** *This kind of visit typically includes: blood pressure, cholesterol, and blood sugar checks, height and weight measurements, and vaccinations. The doctor or other health professional may also discuss topics related to your health such as smoking, alcohol use, diet and exercise. These visits are usually scheduled in advance and occur when you are not sick or injured.*

* **Read if necessary:** *If a wellness exam was combined with a sick care visit, include this visit.*

* **Read if necessary:** *An obstetrician/gynecologist (OB/GYN) may perform this visit.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have seen a doctor

Skip Instructions:

<1> [goto USUALPL_A]

<2,RF,DK> [goto WELLVIS_A]

2025 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0040.00.1 Variable: WELLVIS_A Interview Module: Adult Content Type: Annual Core

Question Text:

About how long has it been since you last saw a doctor or other health professional for a wellness visit, physical, or general purpose check-up?

* **Read if necessary:** *This kind of visit typically includes: blood pressure, cholesterol, and blood sugar checks, height and weight measurements, and vaccinations. The doctor or other health professional may also discuss topics related to your health such as smoking, alcohol use, diet and exercise. These visits are usually scheduled in advance and occur when you are not sick or injured.*

* **Read if necessary:** *If a wellness exam was combined with a sick care visit, include this visit.*

* **Read if necessary:** *An obstetrician/gynecologist (OB/GYN) may perform this visit.*

Fills:

Response:

0	Never
1	Within the past year (anytime less than 12 months ago)
2	Within the last 2 years (1 year but less than 2 years ago)
3	Within the last 3 years (2 years but less than 3 years ago)
4	Within the last 5 years (3 years but less than 5 years ago)
5	Within the last 10 years (5 years but less than 10 years ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have seen a doctor, but the last visit was not a wellness visit or they didn't know or refused whether it was a wellness visit

Skip Instructions:

<0-6,RF,DK> [goto USUALPL_A]

2025 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0050.00.1 Variable: USUALPL_A Interview Module: Adult Content Type: Annual Core

Question Text:

Is there a place that you USUALLY go to if you are sick and need health care?

Fills:

Response:

1	Yes
2	There is NO place
3	There is MORE THAN ONE place
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,3,RF,DK> [goto USPLKIND_A]

<2> [goto RETURGINT_A]

2025 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0060.00.1 Variable: USPLKIND_A Interview Module: Adult Content Type: Annual Core

Question Text:

What kind of place ^ISITGOMSTOFT - a doctor's office or health center; an urgent care center, a clinic in a drug store or grocery store; a hospital emergency room; a VA Medical Center or VA outpatient clinic; or some other place?

*** Read if necessary:** A doctor's office or health center is a place where you see the same doctor or the same group of doctors every visit, where you usually need to make an appointment ahead of time, and where your medical records are on file.

*** Read if necessary:** Urgent care centers and clinics in a drug store or grocery store are places where you do not need to make an appointment ahead of time, and do not usually see the same health care provider at each visit.

Fills:

ISITGOMSTOFT	Description	is it/do you go to most often
	Instruction	If USUALPL_A=1 fill "is it"; else fill "do you go to most often"

Response:

1	A doctor's office or health center
2	Urgent care center or clinic in a drug store or grocery store
3	Hospital emergency room
4	A VA Medical Center or VA outpatient clinic
5	Some other place
6	Does not go to one place most often
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with 1+ usual place of care or who don't know or refused to answer if they have a usual place of care

Skip Instructions:

<1-6,RF,DK> [goto RETURGINT_A]

2025 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0065.00.1 Variable: RETURGINT_A Interview Module: Adult Content Type: Annual Core

Question Text:

The next questions are about your use of retail health clinics and urgent care centers.

* Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto RETAILHC12M_A]

2025 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0070.00.1 Variable: RETAILHC12M_A Interview Module: Adult Content Type: Annual Core

Question Text:

Retail health clinics are located in a pharmacy, grocery store, or supercenter.

During the past 12 months, how many times have you gone to a retail health clinic about your health?

* Enter 96 if number is 96 or greater.

* **Read if necessary:** Common examples of retail health clinics include places like CVS Minute Clinic, Walgreens Health Clinic, or clinics in a Walmart or Kroger supermarket. These clinics can provide common services such as certain vaccinations, as well as testing for or treatment of minor uncomplicated illnesses.

Fills:

Response:

00-95	0-95 times
96	96+ times
97	Refused
99	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<0-39,RF,DK> [goto URGCC12M_A]
<40-96> [goto ERR1_RETAILHC12M_A]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_RETAILHC12M_A	Retail health clinic 40-96 times	{signal ERR1_RETAILHC12M_A} ^RETAILHC12M_A is an unusually large number. Did you visit a retail health clinic center about your health ^RETAILHC12M_A times in the past 12 months? Please verify.

2025 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0075.00.1 Variable: URGCC12M_A Interview Module: Adult Content Type: Annual Core

Question Text:

An urgent care center is located in its own building or space. These centers can provide services such as x-rays and stitches.

During the past 12 months, how many times have you gone to an urgent care center about your health?

* Enter 96 if number is 96 or greater.

* Read if necessary: An urgent care center can provide common vaccinations, testing for or treatment of illnesses. They can also treat illnesses or injuries that require immediate care but are not serious enough to require a visit to a hospital emergency room.

* Read if necessary: This is different from a hospital emergency room.

* Read if necessary: These centers provide care during business hours, evenings, and weekends.

Fills:

Response:

00-95	0-95 times
96	96+ times
97	Refused
99	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<0-39,RF,DK> [goto EMERGE12M_A]

<40-96> [goto ERR1_URGCC12M_A]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_URGCC12M_A	Urgent care 40-96 times	{signal ERR1_URGCC12M_A}
		^URGCC12M_A is an unusually large number. Did you visit an urgent care center about your health ^URGCC12M_A times in the past 12 months? Please verify.

2025 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0080.00.1 Variable: EMERGE12M_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, how many times have you gone to a hospital emergency room about your health?

* **Read if necessary:** *This includes emergency room visits that resulted in a hospital admission.*

* **Enter 96 if number of times is 96 or more.**

Fills:

Response:

00-95	0-95 times
96	96+ times
97	Refused
99	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<0-39,RF,DK> [goto HOSPONGT_A]
<40-96> [goto ERR1_EMERGE12M_A]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_EMERGE12M_A	ER 40-96 times	{signal ERR1_EMERGE12M_A}
		^EMERGE12M_A is an unusually large number. Did you visit a hospital emergency room about your health ^EMERGE12M_A times in the past 12 months? Please verify.

2025 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0090.00.1 Variable: HOSPONGT_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, have you been hospitalized overnight? ^PAST12MER_A

Fills:

PAST12MER_A	Description	Do not include an overnight stay in the emergency room.
	Instruction	If ((EMERGE12M_A ge 01 and EMERGE12M_A le 96) or EMERGE12M_A IN (RF,DK): Fill: "Do not include an overnight stay in the emergency room."

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto MEDDL12M_A]

2025 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0100.00.1 Variable: MEDDL12M_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, have you DELAYED getting medical care because of the cost?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto MEDNG12M_A]

2025 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0110.00.1 Variable: MEDNG12M_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, was there any time when you needed medical care, but DID NOT GET IT because of the cost?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

TLH: Telehealth

Question ID: TLH.0010.00.1 Variable: VIRAPP12M_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, have you had an appointment with a doctor, nurse, or other health professional by video or by phone?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

HIT: Internet access and health information technology

Question ID: HIT.0010.00.4 Variable: ACCSSINT_A Interview Module: Adult Content Type: Emerging Content

Question Text:

Do you have access to the Internet?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto ACCSSHOM_A]

<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

HIT: Internet access and health information technology

Question ID: HIT.0020.00.4 Variable: ACCSSHOM_A Interview Module: Adult Content Type: Emerging Content

Question Text:

Do you have access to the Internet from your home?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with access to the Internet

Skip Instructions:

<1,2,RF,DK> [goto HITLOOK_A]

2025 National Health Interview Survey (NHIS) Questionnaire

HIT: Internet access and health information technology

Question ID: HIT.0030.00.4 Variable: HITLOOK_A Interview Module: Adult Content Type: Emerging Content

Question Text:

During the past 12 months, have you used the Internet for any of the following reasons?

...To look for health or medical information.

* **Read if necessary:** *Include Internet and data use through a computer, tablet, smartphone, or other electronic device.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with access to the Internet

Skip Instructions:

<1,2,RF,DK> [goto HITCOMM_A]

2025 National Health Interview Survey (NHIS) Questionnaire

HIT: Internet access and health information technology

Question ID: HIT.0040.00.4 Variable: HITCOMM_A Interview Module: Adult Content Type: Emerging Content

Question Text:

* **Read if necessary:** *During the past 12 months, have you used the Internet for any of the following reasons?*

...To communicate with a doctor or doctor's office.

* **Read if necessary:** *Include Internet and data use through a computer, tablet, smartphone, or other electronic device.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with access to the Internet

Skip Instructions:

<1,2,RF,DK> [goto HITTEST_A]

2025 National Health Interview Survey (NHIS) Questionnaire

HIT: Internet access and health information technology

Question ID: HIT.0050.00.4 Variable: HITTEST_A Interview Module: Adult Content Type: Emerging Content

Question Text:

* **Read if necessary:** *During the past 12 months, have you used the Internet for any of the following reasons?*

...To look up medical test results.

* **Read if necessary:** *Include Internet and data use through a computer, tablet, smartphone, or other electronic device.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with access to the Internet

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

PMD: Prescription Medication

Question ID: PMD.0010.00.1 Variable: RX12M_A Interview Module: Adult Content Type: Annual Core

Question Text:

At any time in the past 12 months, did you take prescription medication?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto RXSK12M_A]
<2,RF,DK> [goto RXDG12M_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PMD: Prescription Medication

Question ID: PMD.0020.00.1 Variable: RXSK12M_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, were any of the following true for you?

...You skipped medication doses to save money.

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have taken prescription medication in the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto RXLS12M_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PMD: Prescription Medication

Question ID: PMD.0030.00.1 Variable: RXLS12M_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** *During the past 12 months, were any of the following true for you?*

...You took less medication to save money.

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have taken prescribed medication in the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto RXDL12M_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PMD: Prescription Medication

Question ID: PMD.0040.00.1 Variable: RXDL12M_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** *During the past 12 months, were any of the following true for you?*

...You DELAYED filling a prescription to save money.

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have taken prescribed medication in the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto RXDG12M_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PMD: Prescription Medication

Question ID: PMD.0050.00.1 Variable: RXDG12M_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, was there any time when you needed prescription medication, but DID NOT GET IT because of the cost?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0010.00.2 Variable: BPLAST_A Interview Module: Adult Content Type: Rotating Core

Question Text:

When was the last time you had your blood pressure checked by a doctor, nurse, or other health professional?

Fills:

Response:

0	Never
1	Within the past year (anytime less than 12 months ago)
2	Within the last 2 years (1 year but less than 2 years ago)
3	Within the last 3 years (2 years but less than 3 years ago)
4	Within the last 5 years (3 years but less than 5 years ago)
5	Within the last 10 years (5 years but less than 10 years ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<0-6,RF,DK> [goto CHOLLAST_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0020.00.2 Variable: CHOLLAST_A Interview Module: Adult Content Type: Rotating Core

Question Text:

When was the last time you had your cholesterol checked by a doctor, nurse, or other health professional?

Fills:

Response:

0	Never
1	Within the past year (anytime less than 12 months ago)
2	Within the last 2 years (1 year but less than 2 years ago)
3	Within the last 3 years (2 years but less than 3 years ago)
4	Within the last 5 years (3 years but less than 5 years ago)
5	Within the last 10 years (5 years but less than 10 years ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

```
<0-6,RF,DK> if DIB.DIBEV_A IN (2,RF,DK) [goto DIBLAST1_A]
elseif DIB.DIBEV_A=1 [goto DIBA1CLAST_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0030.00.2 Variable: DIBLAST1_A Interview Module: Adult Content Type: Rotating Core

Question Text:

When was the last time you had a blood test for high blood sugar or diabetes by a doctor, nurse, or other health professional?

Fills:

Response:

0	Never
1	Within the past year (anytime less than 12 months ago)
2	Within the last 2 years (1 year but less than 2 years ago)
3	Within the last 3 years (2 years but less than 3 years ago)
4	Within the last 5 years (3 years but less than 5 years ago)
5	Within the last 10 years (5 years but less than 10 years ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have not been told they have diabetes

Skip Instructions:

```
<0-6,RF,DK> if GEN.AGE_FINAL[PX_A] ge 35 [goto COLORECTEV2_A]
elseif (GEN.SEX_FINAL[PX_A]=2 and (GEN.AGE_FINAL[PX_A] lt 35 or GEN.AGE_FINAL[PX_A] IN (DK,RF)))
[goto CERVICV1_A]
elseif (GEN.SEX_FINAL[PX_A]=1 and (GEN.AGE_FINAL[PX_A] lt 35 or GEN.AGE_FINAL[PX_A] IN (DK,RF)))
or GEN.SEX_FINAL[PX_A] IN (DK,RF) [goto next section]
```

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0033.00.3 Variable: DIBA1CLAST_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

An A-one-C test is used to measure the average level of blood sugar over the past three months. When was the last time you had your A1C checked by a doctor, nurse, or other health professional?

* **Read if necessary:** A1C values typically range between 5 and 13.9. For many people with diabetes the goal is to have an A1C of 7 or less, but your goal may be different depending on what you and your doctor determine is best for you.

Fills:

Response:

0	Never
1	Within the past year (anytime less than 12 months ago)
2	Within the last 2 years (1 year but less than 2 years ago)
3	Within the last 3 years (2 years but less than 3 years ago)
4	Within the last 5 years (3 years but less than 5 years ago)
5	Within the last 10 years (5 years but less than 10 years ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have been told they have diabetes

Skip Instructions:

```
<1> [goto DIBA1CNUM_A]
<0,2-6,RF,DK> if GEN.AGE_FINAL[PX_A] ge 35 [goto COLORECTEV2_A]
elseif (GEN.SEX_FINAL[PX_A]=2 and (GEN.AGE_FINAL[PX_A] lt 35 or GEN.AGE_FINAL[PX_A] IN (DK,RF)))
[goto CERVICV1_A]
elseif (GEN.SEX_FINAL[PX_A]=1 and (GEN.AGE_FINAL[PX_A] lt 35 or GEN.AGE_FINAL[PX_A] IN (DK,RF)))
or GEN.SEX_FINAL[PX_A] IN (DK,RF) [goto next section]
```

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0037.00.3 Variable: DIBA1CNUM_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

About how many times in the past 12 months has a doctor, nurse, or other health professional checked your A-one-C?

* **Read if necessary:** *A1C values typically range between 5 and 13.9. For many people with diabetes the goal is to have an A1C of 7 or less, but your goal may be different depending on what you and your doctor determine is best for you.*

* **If respondent reports more than 96 A1C tests, enter '96'.**

Fills:

Response:

01-95	Range of values
96	96 or more
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who had their A1C checked in the past 12 months

Skip Instructions:

```
<1-96,RF,DK> if GEN.AGE_FINAL[PX_A] ge 35 [goto COLORECTEV2_A]
elseif (GEN.SEX_FINAL[PX_A]=2 and (GEN.AGE_FINAL[PX_A] lt 35 or GEN.AGE_FINAL[PX_A] IN (DK,RF)))
[goto CERVICEV1_A]
elseif (GEN.SEX_FINAL[PX_A]=1 and (GEN.AGE_FINAL[PX_A] lt 35 or GEN.AGE_FINAL[PX_A] IN (DK,RF)))
or GEN.SEX_FINAL[PX_A] IN (DK,RF) [goto next section]
```

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0040.00.2 Variable: COLORECTEV2_A Interview Module: Adult Content Type: Rotating Core

Question Text:

These next questions are about colorectal cancer screening. Colonoscopy and sigmoidoscopy are exams to check for colon cancer. Have you ever had either of these exams?

* **Read if necessary:** *Colonoscopy (colon-OS-copy) and sigmoidoscopy (sigmoid-OS-copy) are exams in which a doctor inserts a tube into the rectum to look for polyps or cancer.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 35+

Skip Instructions:

<1> [goto COLORECTYP2_A]
<2,RF,DK> [goto CTCOLEV2_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0050.00.2 Variable: COLORECTYP2_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Have you had a colonoscopy, a sigmoidoscopy, or both?

* **Read if necessary:** *For a colonoscopy, the doctor checks the entire colon, and you are given medication through a needle in your arm to make you sleepy, and told to have someone take you home. For a sigmoidoscopy, the doctor checks only part of the colon and you are fully awake.*

Enter 'DK' if respondent has had a colonoscopy or sigmoidoscopy, but doesn't know which.

Fills:

Response:

1	Colonoscopy
2	Sigmoidoscopy
3	Both
7	Refused
9	Don't Know

Universe:

Sample Adults 35+ who have had a colonoscopy or sigmoidoscopy or both

Skip Instructions:

<1,3> [goto COLWHEN2_A]
<2> [goto SIGWHEN2_A]
<DK> [goto COLSIGWHEN2_A]
<RF> [goto CTCOLEV2_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0060.00.2 Variable: COLWHEN2_A Interview Module: Adult Content Type: Rotating Core

Question Text:

About how long has it been since your MOST RECENT colonoscopy?

Fills:

Response:

1	Within the past year (anytime less than 12 months ago)
2	Within the past 2 years (1 year but less than 2 years ago)
3	Within the past 3 years (2 years but less than 3 years ago)
4	Within the past 5 years (3 years but less than 5 years ago)
5	Within the past 10 years (5 years but less than 10 year ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample Adults 35+ who have ever had a colonoscopy or both a colonoscopy and a sigmoidoscopy

Skip Instructions:

<1-6,RF,DK> [goto COLREASON2_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0070.00.3 Variable: COLREASON2_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

What was the MAIN reason you had this most recent colonoscopy - was it part of a routine exam, because of a problem, as a follow-up test of an earlier test or screening exam, or some other reason?

Fills:

Response:

1	Part of a routine exam
2	Because of a problem
3	Follow-up test of an earlier test or screening exam
4	Other reason
7	Refused
9	Don't Know

Universe:

Sample Adults 35+ who ever had a colonoscopy or both a colonoscopy and a sigmoidoscopy

Skip Instructions:

<1-4,RF,DK> [goto COLPAY2_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0080.00.3 Variable: COLPAY2_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Did you pay none, part, or all of the cost for your most recent colonoscopy?

Fills:

Response:

1	None of the cost
2	Part of the cost
3	All of the cost
7	Refused
9	Don't Know

Universe:

Sample Adults 35+ who ever had a colonoscopy or both a colonoscopy and a sigmoidoscopy

Skip Instructions:

<1-3,RF,DK> if COLORECTYP2_A=3 [goto SIGWHEN2_A]
else [goto CTCOLEV2_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0090.00.2 Variable: COLSIGWHEN2_A Interview Module: Adult Content Type: Rotating Core

Question Text:

When was your MOST RECENT colonoscopy or sigmoidoscopy?

Fills:

Response:

1	Within the past year (anytime less than 12 months ago)
2	Within the past 2 years (1 year but less than 2 years ago)
3	Within the past 3 years (2 years but less than 3 years ago)
4	Within the past 5 years (3 years but less than 5 years ago)
5	Within the past 10 years (5 years but less than 10 year ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample Adults 35+ who have ever had a colonoscopy or sigmoidoscopy but do not know which type

Skip Instructions:

<1-6,RF,DK> [goto CTCOLEV2_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0100.00.2 Variable: SIGWHEN2_A Interview Module: Adult Content Type: Rotating Core

Question Text:

When was your MOST RECENT sigmoidoscopy?

Fills:

Response:

1	Within the past year (anytime less than 12 months ago)
2	Within the past 2 years (1 year but less than 2 years ago)
3	Within the past 3 years (2 years but less than 3 years ago)
4	Within the past 5 years (3 years but less than 5 years ago)
5	Within the past 10 years (5 years but less than 10 year ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample Adults 35+ who have ever had a sigmoidoscopy or both a colonoscopy and a sigmoidoscopy

Skip Instructions:

<1-6,RF,DK> [goto CTCOLEV2_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0120.00.2 Variable: CTCOLEV2_A Interview Module: Adult Content Type: Rotating Core

Question Text:

CT colonography, sometimes called virtual colonoscopy, is a test that looks for cancer in the colon. Unlike regular colonoscopies, you do not need medication to make you sleepy during the test. In this test, your colon is filled with air and you are moved through a donut-shaped X-ray machine as you lie on your back and then your stomach. Have you ever had a CT colonography or virtual colonoscopy?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 35+

Skip Instructions:

<1> [goto CTCOLWHEN2_A]
<2,RF,DK> [goto FITHEV2_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0130.00.2 Variable: CTCOLWHEN2_A Interview Module: Adult Content Type: Rotating Core

Question Text:

When was your most recent CT colonography or virtual colonoscopy?

Fills:

Response:

1	Within the past year (anytime less than 12 months ago)
2	Within the past 2 years (1 year but less than 2 years ago)
3	Within the past 3 years (2 years but less than 3 years ago)
4	Within the past 5 years (3 years but less than 5 years ago)
5	Within the past 10 years (5 years but less than 10 year ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample Adults 35+ who have had a CT colonography or virtual colonoscopy

Skip Instructions:

<1-6,RF,DK> [goto FITHEV2_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0140.00.2 Variable: FITHEV2_A Interview Module: Adult Content Type: Rotating Core

Question Text:

The following questions are about the blood stool or fecal occult blood test, fecal immunochemical or FIT test. These are tests to determine whether you have blood in your stool or bowel movement and can be done at home using a kit. You use a stick or brush to obtain a small amount of stool at home and send it back to the doctor or lab.

Have you ever had a blood stool or FIT test, using a HOME test kit?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 35+

Skip Instructions:

<1> [goto FITHWHEN2_A]
<2,RF,DK> [goto COLOGUARD2_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0150.00.2 Variable: FITHWHEN2_A Interview Module: Adult Content Type: Rotating Core

Question Text:

When was your most recent blood stool or FIT test, using a home test kit?

Fills:

Response:

1	Within the past year (anytime less than 12 months ago)
2	Within the past 2 years (1 year but less than 2 years ago)
3	Within the past 3 years (2 years but less than 3 years ago)
4	Within the past 5 years (3 years but less than 5 years ago)
5	Within the past 10 years (5 years but less than 10 year ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample Adults 35+ who have ever had a home blood stool or FIT test

Skip Instructions:

<1-6,DK,RF> [goto COLOGUARD2_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0160.00.3 Variable: COLOGUARD2_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Cologuard is another type of stool test for colon cancer. It tests for blood in your stool and DNA changes. With the Cologuard test, you mail a whole bowel movement back in a container to be tested. Have you ever had a Cologuard test?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 35+

Skip Instructions:

```
<1> if FITHEV2_A=1 [goto FITCOLG2_A]
elseif FITHEV2_A IN (2,RF,DK) [goto CGUARDWHE2_A]

<2,RF,DK> if ((COLWHEN2_A=1-5 or SIGWHEN2_A=1-4 or CTCOLWHEN2_A=1-4 or COLSIGWHEN2_A=1-4 or
FITCOLG_CUR_FLG_A IN (1,2)) and GEN.SEX_FINAL[PX_A]=1 and GEN.AGE_FINAL[PX_A] ge 40) [goto
PSATEST_A]

elseif ((COLWHEN2_A=1-5 or SIGWHEN2_A=1-4 or CTCOLWHEN2_A=1-4 or COLSIGWHEN2_A=1-4 or
FITCOLG_CUR_FLG_A IN (1,2)) and GEN.SEX_FINAL[PX_A]=2) [goto CERVICV1_A]

elseif ((COLWHEN2_A=1-5 or SIGWHEN2_A=1-4 or CTCOLWHEN2_A=1-4 or COLSIGWHEN2_A=1-4 or
FITCOLG_CUR_FLG_A IN (1,2)) and (GEN.SEX_FINAL[PX_A] in (RF,DK) or (GEN.SEX_FINAL[PX_A]=1 and
GEN.AGE_FINAL[PX_A] le 39))) [goto next section]

else [goto COLPROB2_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0170.00.3 Variable: FITCOLG2_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Was the blood stool or FIT test you reported earlier conducted as part of a Cologuard test?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 35+ who ever had a blood stool or FIT test using a home test kit and ever had a Cologuard test

Skip Instructions:

<1> if ((COLWHEN2_A=1-5 or SIGWHEN2_A=1-4 or CTCOLWHEN2_A=1-4 or COLSIGWHEN2_A=1-4 or FITCOLGCUR_FLG_A=2) and GEN.SEX_FINAL[PX_A]=1 and GEN.AGE_FINAL[PX_A] ge 40) [goto PSATEST_A]

elseif ((COLWHEN2_A=1-5 or SIGWHEN2_A=1-4 or CTCOLWHEN2_A=1-4 or COLSIGWHEN2_A=1-4 or FITCOLGCUR_FLG_A=2) and GEN.SEX_FINAL[PX_A]=2) [goto CERVICEV1_A]

elseif ((COLWHEN2_A=1-5 or SIGWHEN2_A=1-4 or CTCOLWHEN2_A=1-4 or COLSIGWHEN2_A=1-4 or FITCOLGCUR_FLG_A=2) and (GEN.SEX_FINAL[PX_A] IN (RF,DK) or (GEN.SEX_FINAL[PX_A]=1 and GEN.AGE_FINAL[PX_A] le 39))) [goto next section]

else [goto COLPROB2_A]

<2,RF,DK> [goto CGUARDWHE2_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0180.00.3 Variable: CGUARDWHE2_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

When did you have your most recent Cologuard test?

Fills:

Response:

1	Within the past year (anytime less than 12 months ago)
2	Within the past 2 years (1 year but less than 2 years ago)
3	Within the past 3 years (2 years but less than 3 years ago)
4	Within the past 5 years (3 years but less than 5 years ago)
5	Within the past 10 years (5 years but less than 10 year ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample Adults 35+ who ever had a Cologuard test and, if they had a home FIT test, did not say the Cologuard was part of the FIT test or they did not have a home FIT test or don't know or refused

Skip Instructions:

```
<1-3> if GEN.SEX_FINAL[PX_A]=1 and GEN.AGE_FINAL[PX_A] ge 40 [goto PSATEST_A]
elseif GEN.SEX_FINAL[PX_A]=1 and GEN.AGE_FINAL[PX_A] le 39 [goto next section]
elseif GEN.SEX_FINAL[PX_A]=2 [goto CERVICV1_A]
elseif GEN.SEX_FINAL[PX_A] IN (RF,DK) [goto next section]

<4-6,RF,DK> if ((COLWHEN2_A=1-5 or SIGWHEN2_A IN=1-4 or CTCOLWHEN2_A=1-4 or COLSIGWHEN2_A=1-4 or
FITCOLGCUR_FLG_A IN (1,2)) and GEN.SEX_FINAL[PX_A]=1 and GEN.AGE_FINAL[PX_A] ge 40) [goto
PSATEST_A]

elseif ((COLWHEN2_A=1-5 or SIGWHEN2_A IN=1-4 or CTCOLWHEN2_A=1-4 or COLSIGWHEN2_A=1-4 or
FITCOLGCUR_FLG_A IN (1,2)) and GEN.SEX_FINAL[PX_A]=2) [goto CERVICV1_A]

elseif ((COLWHEN2_A=1-5 or SIGWHEN2_A IN=1-4 or CTCOLWHEN2_A=1-4 or COLSIGWHEN2_A=1-4 or
FITCOLGCUR_FLG_A IN (1,2)) and (GEN.SEX_FINAL[PX_A] IN (RF,DK) or (GEN.SEX_FINAL[PX_A]=1 and
GEN.AGE_FINAL[PX_A] ge 40))) [goto next section]

else [goto COLPROB2_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0190.00.3 Variable: COLPROB2_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

In the past 12 MONTHS, did a doctor or other health professional RECOMMEND that you be tested to look for problems in your colon or rectum?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample adults 35+ who never had a colonoscopy or had a colonoscopy over 10 years ago, or don't know or refused when they had a colonoscopy, and never had a sigmoidoscopy or had a sigmoidoscopy over 5 years ago, or don't know or refused when they had a sigmoidoscopy, or had a sigmoidoscopy or colonoscopy but don't know which over 5 years ago, and never had a CT colonography or had a CT colonography over 5 years ago, or don't know or refused when they had a CT colonography, and never had a FIT test or had a FIT over 1 year ago and did not, did not know, or refused to say if they had a Cologuard test, or had a FIT that did not, don't know, or refused to say if it included a Cologuard test over 1 year ago or don't know or refused when they had a FIT test or had a FIT test that included a Cologuard more than 3 years ago or don't know or refused when to say they had a FIT test and never had a Cologuard test or had a Cologuard test more than 3 years ago, or don't know or refused when they had a Cologuard test

Skip Instructions:

```
<1> [goto COL2TEST_A]
<2,RF,DK> if GEN.SEX_FINAL[PX_A]=1 and GEN.AGE_FINAL[PX_A] ge 40 [goto PSATEST_A]
elseif GEN.SEX_FINAL[PX_A]=2 [goto CERVICV1_A]
elseif (GEN.SEX_FINAL[PX_A] IN (RF,DK) or (GEN.SEX_FINAL[PX_A]=1 and GEN.AGE_FINAL[PX_A] le 39))
[goto next section]
```

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0200.00.3 Variable: COL2TEST_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Which tests to check for colon cancer did the doctor or other health professional recommend to you? Possible tests include stool blood or fecal occult blood or FIT test; Cologuard or FIT DNA test; sigmoidoscopy; colonoscopy; CT colonography or virtual colonoscopy; or other.

* Enter all that apply, separate with commas.

Fills:

Response:

1	Stool blood test/fecal occult blood/FIT test
2	Cologuard or FIT DNA test
3	Sigmoidoscopy
4	Colonoscopy
5	CT colonography/virtual colonoscopy
6	Other
7	Refused
9	Don't Know

Universe:

Sample Adults 35+ who had another type of colon test recommended

Skip Instructions:

```
<1-6,RF,DK> if GEN.SEX_FINAL[PX_A]=1 and GEN.AGE_FINAL[PX_A] ge 40 [goto PSATEST_A]
elseif GEN.SEX_FINAL[PX_A]=2 [goto CERVICV1_A]
elseif (GEN.SEX_FINAL[PX_A] IN (RF,DK) or (GEN.SEX_FINAL[PX_A]=1 and GEN.AGE_FINAL[PX_A] le 39))
[goto next section]
```

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0210.00.3 Variable: PSATEST_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

A PSA test is a blood test to detect prostate cancer. It is also called a prostate-specific antigen test. Have you EVER had a PSA test?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Male Sample Adults 40+

Skip Instructions:

<1> [goto PSAWHEN_A]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0220.00.3 Variable: PSAWHEN_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

About how long has it been since your MOST RECENT PSA test?

Fills:

Response:

1	Within the past year (anytime less than 12 months ago)
2	Within the past 2 years (1 year but less than 2 years ago)
3	Within the past 3 years (2 years but less than 3 years ago)
4	Within the past 5 years (3 years but less than 5 years ago)
5	Within the past 10 years (5 years but less than 10 year ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Male Sample Adults 40+ who ever had a PSA test

Skip Instructions:

<1-6,RF,DK> [goto PSAREASON_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0230.00.3 Variable: PSAREASON_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

What was the MAIN reason you had this PSA test - was it part of a routine exam, because of a problem, or some other reason?

Fills:

Response:

1	Part of a routine exam
2	Because of a problem
3	Other reason
7	Refused
9	Don't Know

Universe:

Male Sample Adults 40+ who ever had a PSA test

Skip Instructions:

<1-3,RF,DK> if PSAWHEN_A IN (1-5,RF,DK) [goto PSA5YR1_A]
else [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0250.00.3 Variable: PSA5YR1_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

How many PSA tests have you had in the LAST 5 years?

Fills:

Response:

0	0 tests
1	1 test
2	2 tests
3	3 tests
4	4 tests
5	5 tests
6	6 or more tests
7	Refused
9	Don't Know

Universe:

Male Sample Adults 40+ who ever had a PSA test but not more than 10 years ago or refused or don't know

Skip Instructions:

<0-6,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0280.00.2 Variable: CERVICEV1_A Interview Module: Adult Content Type: Rotating Core

Question Text:

There are two different kinds of tests to check for cervical cancer. One is a Pap smear or Pap test and the other is the HPV or Human Papillomavirus test.

Have you EVER HAD a test or tests to check for cervical cancer?

* **Read if necessary:** *These are routine tests for women in which a doctor or other health professional takes a sample from the cervix through the vagina with a swab or brush and sends it to the lab.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Female Sample Adults 18+

Skip Instructions:

<1> [goto CERVICWHEN_A]
<2> [goto CERVICNOT1_A]
<RF,DK> [goto HYTEV1_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0290.00.2 Variable: CERVICWHEN_A Interview Module: Adult Content Type: Rotating Core

Question Text:

When did you have your MOST RECENT test to check for cervical cancer?

Fills:

Response:

1	Within the past year (anytime less than 12 months ago)
2	Within the past 2 years (1 year but less than 2 years ago)
3	Within the past 3 years (2 years but less than 3 years ago)
4	Within the past 5 years (3 years but less than 5 years ago)
5	Within the past 10 years (5 years but less than 10 year ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Female Sample Adults 18+ who have ever had a cervical cancer test

Skip Instructions:

<1-6,RF,DK> [goto CERREASON1_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0300.00.3 Variable: CERREASON1_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

What was the MAIN reason you had this cervical cancer test - was it part of a routine exam, because of a problem, or as a follow-up test of an earlier test or screening exam, or some other reason?

Fills:

Response:

1	Part of a routine exam
2	Because of a problem
3	Follow-up test of an earlier test or screening exam
4	Other reason
7	Refused
9	Don't Know

Universe:

Female Sample Adults 18+ who have ever had a cervical cancer test

Skip Instructions:

<1-4,RF,DK> [goto PAPTEST_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0310.00.3 Variable: PAPTEST_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

At your MOST RECENT cervical cancer screening, did you have a Pap test?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Female Sample Adults 18+ who ever had a cervical cancer test

Skip Instructions:

<1,2,RF,DK> [goto HPVTEST_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0320.00.3 Variable: HPVTEST_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

At your MOST RECENT cervical cancer screening, did you have an HPV test?

* **Read if necessary:** HPV stands for Human Papillomavirus.

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Female Sample Adults 18+ who ever had a cervical cancer test

Skip Instructions:

<1,2,RF,DK> [goto TELLCERVIC_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0325.00.3 Variable: TELLCERVIC_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

At your MOST RECENT cervical cancer screening, did a doctor or other health professional tell you which type of test or tests you received?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Female Sample Adults 18+ who ever had a cervical cancer test

Skip Instructions:

<1,2,RF,DK> if CERVICWHEN_A IN (1,2,3,4) [goto CERVICRES_A]
if CERVICWHEN_A IN (5,6) [goto CERVICNOT1_A]
if CERVICWHEN_A IN (RF,DK) [goto HYSTEV1_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0330.00.3 Variable: CERVICRES_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

In the PAST 5 years, did any of your cervical cancer screening tests require follow-up to check for cancer or precancerous cells?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Female Sample Adults 18+ who had a cervical cancer test within the past 5 years

Skip Instructions:

<1,2,RF,DK> [goto HYTEV1_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0340.00.3 Variable: CERVICNOT1_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

What is the MAIN REASON that you have ^never5yearsPAPHPV?

* Do not read choices, select answer category based on respondent's answer.

Fills:

never5yearsPAPHPV	Description	NEVER had a test to check for cervical cancer/NOT had a test to check for cervical cancer in the last 5 years
	Instruction	If CERVICV1_A=2 fill "NEVER had a test to check for cervical cancer" If CERVICV1_A=1 and CERVICWHEN_A IN (5,6) fill: "NOT had a test to check for cervical cancer in the last 5 years"

Response:

01	No reason/never thought about it
02	Didn't need it/didn't know I needed this type of test
03	Doctor didn't order it/didn't say I needed it
04	Haven't had any problems
05	Put it off/didn't get around to it
06	Too expensive/no insurance/cost
07	Too painful, unpleasant, or embarrassing
08	Had hysterectomy
09	Don't have a doctor
10	Had HPV vaccine
11	I am too old
12	I am too young
13	Other
97	Refused
99	Don't Know

Universe:

Female Sample Adults 18+ who never had a cervical cancer test or had their last cervical cancer test more than 5 years ago

Skip Instructions:

<1-7,9-13,RF,DK> [goto HYSTEV1_A]
<8> [goto OVREMEV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0350.00.2 Variable: HYTEV1_A Interview Module: Adult Content Type: Rotating Core

Question Text:

A hysterectomy is when the uterus or womb is removed, this is different from having your tubes tied. Have you had a hysterectomy?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Female Sample Adults 18+ who have not already indicated they had a hysterectomy

Skip Instructions:

<1,2,RF,DK> [goto next OVREMEV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0355.00.3 Variable: OVREMEV_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Have you had BOTH ovaries removed, ^HYST as one or more separate surgeries?

Fills:

HYST	Description	either as a part of a hysterectomy or
	Instruction	If HYTEV1=1 or CERVICNOT1_A=8, fill "either as a part of a hysterectomy or" else fill blank

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Female Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> if GEN.AGE_FINAL[PX_A] ge 30 [goto MAMEV_A]
elseif GEN.AGE_FINAL[PX_A] ge 25 and GEN.AGE_FINAL[PX_A] lt 30 [goto BREASTEXAM2_A]
elseif GEN.AGE_FINAL[PX_A] lt 25 or GEN.AGE_FINAL IN (RF,DK) [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0360.00.2 Variable: MAMEV_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Have you EVER HAD a mammogram?

* **Read if necessary:** *A mammogram is an x-ray taken only of the breast by a machine that presses against the breast.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Female Sample Adults 30+

Skip Instructions:

<1> [goto MAMWHEN_A]
<2,RF,DK> [goto BREASTEXAM2_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0370.00.2 Variable: MAMWHEN_A Interview Module: Adult Content Type: Rotating Core

Question Text:

About how long has it been since your MOST RECENT mammogram?

Fills:

Response:

1	Within the past year (anytime less than 12 months ago)
2	Within the past 2 years (1 year but less than 2 years ago)
3	Within the past 3 years (2 years but less than 3 years ago)
4	Within the past 5 years (3 years but less than 5 years ago)
5	Within the past 10 years (5 years but less than 10 year ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Female Sample Adults 30+ who have had a mammogram

Skip Instructions:

<1-6,RF,DK> [goto MAMREASON_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0390.00.3 Variable: MAMREASON_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

What was the MAIN reason you had this mammogram - was it part of a routine exam, because of a problem, or some other reason?

Fills:

Response:

1	Part of a routine exam
2	Because of a problem
3	Other reason
7	Refused
9	Don't Know

Universe:

Female Sample Adults 30+ who have ever had a mammogram

Skip Instructions:

<1-3,RF,DK> [goto MAMDNR_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0400.00.3 Variable: MAMDNBR_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

After your most recent mammogram, did you receive information about whether or not your breast tissue is dense?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Female Sample Adults 30+ who have ever had a mammogram

Skip Instructions:

<1,2,RF,DK> [goto BREASTEXAM2_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0410.00.3 Variable: BREASTEXAM2_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Have you EVER HAD a breast exam done by a doctor or other health professional to check for lumps or other signs of breast cancer?

Read if necessary: *A breast exam is when the breasts are felt by a doctor or other health professional to check for lumps or other signs of breast cancer.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Female sample adults 25+

Skip Instructions:

<1> [goto BEXAMWHEN2_A]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0420.00.3 Variable: BEXAMWHEN2_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

About how long has it been since your MOST RECENT breast exam?

Fills:

Response:

1	Within the past year (anytime less than 12 months ago)
2	Within the past 2 years (1 year but less than 2 years ago)
3	Within the past 3 years (2 years but less than 3 years ago)
4	Within the past 5 years (3 years but less than 5 years ago)
5	Within the past 10 years (5 years but less than 10 year ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Female Sample Adults 25+ who have ever had a breast exam

Skip Instructions:

<1-6,RF,DK> [goto BEXAMREAS2_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PRV: Preventive screening

Question ID: PRV.0430.00.3 Variable: BEXAMREAS2_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

What was the MAIN REASON you had this breast exam -- was it part of a routine exam, because of a problem, or some other reason?

Fills:

Response:

1	Part of a routine exam
2	Because of a problem
3	Other reason
7	Refused
9	Don't Know

Universe:

Female Sample Adults 25+ who ever had a breast exam

Skip Instructions:

<1-3,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

MNP: Menopause

Question ID: MNP.0010.00.3 Variable: MNPSYMP_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

The next questions are about menopause. Symptoms commonly associated with menopause include hot flashes, night sweats, insomnia or sleep disturbances, irregular vaginal bleeding or menstrual cycles, and vaginal dryness.

In the past 12 months, have you experienced any of these symptoms associated with menopause?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Female Sample Adults 40-70 who have not had a hysterectomy, have not had ovaries removed, are not currently pregnant and have not had a live birth in the past 12 months, or answered DK or REF to any of these questions

Skip Instructions:

<1> [goto MNPRXMED_A]
<2,RF,DK> [goto MNPPD12M_A]

2025 National Health Interview Survey (NHIS) Questionnaire

MNP: Menopause

Question ID: MNP.0020.00.3 Variable: MNPRXMED_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Are you currently taking any PRESCRIPTION medication to treat symptoms associated with menopause?

**Read if necessary: Examples of medication to treat symptoms associated with menopause may include Veozah® (vee-OWE-zuh) and paroxetine (purr-OCK-suh-teen), also known as Brisdelle® (Brizz-DELL), estrogen hormone therapy such as Premarin® (PREH-murr-inn) as tablets or cream, or birth control.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Female Sample Adults 40-70 who have not had a hysterectomy, have not had ovaries removed, are not currently pregnant and have not had a live birth in the past 12 months, or answered DK or REF to any of these questions and have had symptoms associated with menopause in the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto MNPPD12M_A]

2025 National Health Interview Survey (NHIS) Questionnaire

MNP: Menopause

Question ID: MNP.0030.00.3 Variable: MNPPD12M_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Have you had at least one menstrual period in the past 12 months?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Female Sample Adults 40-70 who have not had a hysterectomy, have not had ovaries removed, are not currently pregnant and have not had a live birth in the past 12 months, or answered DK or REF to any of these questions

Skip Instructions:

<1,RF,DK> [goto next section]
<2> [goto MNPSTPMED_A]

2025 National Health Interview Survey (NHIS) Questionnaire

MNP: Menopause

Question ID: MNP.0040.00.3 Variable: MNPSTPMED_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Has your menstrual period stopped because you received medical treatment for irregular vaginal bleeding, such as an IUD, uterine ablation (uh-BLAY-shunn), birth control pills, or other hormone treatment?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Female Sample Adults 40-70 who have not had a hysterectomy, have not had ovaries removed, are not currently pregnant and have not had a live birth in the past 12 months, or answered DK or REF to any of these questions and have not had a menstrual period in the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0020.00.1 Variable: FLUINTRO_A Interview Module: Adult Content Type: Annual Core

Question Text:

There are currently vaccines available for seasonal influenza and coronavirus or COVID-19. I will first ask you questions about seasonal flu vaccination and then about coronavirus or COVID-19 vaccination.

* Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto SHTFLU12M_A]

2025 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0030.00.1 Variable: SHTFLU12M_A Interview Module: Adult Content Type: Annual Core

Question Text:

There are two types of flu vaccinations. One is a shot and the other is a spray, mist, or drop in the nose. During the past 12 months, have you had a flu vaccination?

* **Read if necessary:** *A flu vaccination is usually given in the fall and protects against influenza for the flu season.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto SHTFLUM_A]
<2,RF,DK> [goto SHTCVD192_A]

2025 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0040.01.1 Variable: SHTFLUM_A Interview Module: Adult Content Type: Annual Core

Question Text:

* 1 of 2

During what month and year did you receive your most recent flu vaccine?

Fills:

Response:

01	January
02	February
03	March
04	April
05	May
06	June
07	July
08	August
09	September
10	October
11	November
12	December
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who had a flu shot in the past 12 months

Skip Instructions:

<1-12,DK> [goto SHTFLUY_A]

<RF> [goto SHTCVD192_A]

2025 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0040.02.1 Variable: SHTFLUY_A Interview Module: Adult Content Type: Annual Core

Question Text:

* 2 of 2

* Enter year of most recent flu vaccine.

Fills:

Response:

Year	Year
9997	Refused
9999	Don't Know

Universe:

Sample Adults 18+ who gave a month for their last flu shot or who didn't know the month

Skip Instructions:

```
<valid year,RF,DK>
if SHTFLUM_A and SHTFLUY_A=a future date [goto ERR1_SHTFLUY_A]
elseif SHTFLUM_A and SHTFLUY_A=a date before 12 months ago [goto ERR2_SHTFLUY_A]
else [goto SHTCVD192_A]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR2_SHTFLUY_A	Date > 12 months ago hard edit	{check ERR2_SHTFLUY_A} Date more than 12 months ago. Please correct.
ERR1_SHTFLUY_A	Future date hard edit	{check ERR1_SHTFLUY_A} Future date invalid. Please correct.

2025 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0050.00.3 Variable: SHTCVD192_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

The next questions are about coronavirus or COVID-19 vaccination. During the past 12 months, have you had at least one dose of a COVID-19 vaccination?

* **Read if necessary:** *COVID-19 vaccines approved for use in the United States are made by Pfizer-BioNTech, also called Comirnaty® (koe-mir'-na-tee), Moderna, also called Spikevax®, and Novavax.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto CVDVAC1M3_A]
<2,RF,DK> [goto SHTPNUEV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0060.01.3 Variable: CVDVAC1M3_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

* 1 of 2

During what month and year did you receive your MOST RECENT COVID-19 vaccination?

* Enter month of most recent COVID-19 vaccination.

Fills:

Response:

01	January
02	February
03	March
04	April
05	May
06	June
07	July
08	August
09	September
10	October
11	November
12	December
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who have had a COVID-19 vaccination in the past 12 months.

Skip Instructions:

<1-12,DK> [goto CVDVAC1Y3_A]

<RF> [goto SHTPNUEV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0060.02.3 Variable: CVDVAC1Y3_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

* 2 of 2

* Enter year of most recent COVID-19 vaccination.

Fills:

Response:

2000-2030	Range of values
9997	Refused
9999	Don't Know

Universe:

Sample Adults 18+ who gave month of most recent COVID-19 vaccination or don't know

Skip Instructions:

```
<valid year,RF,DK>
if CVDVAC1M3_A and CVDVAC1Y3_A=a future date [goto ERR1_CVDVAC1Y3_A];
if CVDVAC1Y2_A =a date before 12 months ago [goto ERR2_CVDVAC1Y3_A];
else [goto SHTPNUEV_A]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR1_CVDVAC1Y3_A	Most recent COVID-19 vaccination in future	{check ERR1_CVDVAC1Y3_A} Future date invalid. Please correct.

2025 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0070.00.1 Variable: SHTPNUEV_A Interview Module: Adult Content Type: Annual Core

Question Text:

A pneumonia shot is also known as a pneumococcal vaccine. Have you EVER had a pneumonia shot?

* **Read if necessary:** *There are two types of pneumonia shots: polysaccharide (polly-SACK-ah-ride), also known as Pneumovax®, and conjugate, also known as Prevnar® or Vaxneuvance®.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

```
<1> [goto SHTPNEUNB_A]
<2,RF,DK> if GEN.AGE_FINAL[PX_A] ge 50 [goto SHTSHINGL2_A]
elseif (GEN.AGE_FINAL[PX_A] le 49 or GEN.AGE_FINAL[PX_A] IN (DK,RF)) and LIVEBIRTH1_A=1 [goto
TDAPPREG1_A]
else [goto SHTTETANUS_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0080.00.1 Variable: SHTPNEUNB_A Interview Module: Adult Content Type: Annual Core

Question Text:

How many pneumonia shots have you ever had?

Fills:

Response:

1	One pneumonia shot
2	Two pneumonia shots
3	More than two pneumonia shots
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who ever had a pneumonia shot

Skip Instructions:

```
<1-3,RF,DK> if GEN.AGE_FINAL[PX_A] ge 50 [goto SHTSHINGL2_A]
elseif (GEN.AGE_FINAL[PX_A] le 49 or GEN.AGE_FINAL[PX_A] IN (DK,RF)) and LIVEBIRTH1_A=1 [goto
TDAPPREG1_A]
else [goto SHTTETANUS_A]
```


2025 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0090.00.3 Variable: SHTSHINGL2_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Have you had a vaccine for shingles?

* **Read if necessary:** *Shingles is an illness that results in a rash or blisters on the skin, and is usually painful. There are two vaccines that have been used to prevent shingles. The first was Zostavax®, which was available in the U.S. from 2006 through 2020 and required one shot. The other is Shingrix®, which has been available since 2017 and requires two shots.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 50+

Skip Instructions:

```
<1,2,RF,DK> if (GEN.AGE_FINAL[PX_A] le 49 or GEN.AGE_FINAL[PX_A] IN (DK,RF)) and LIVEBIRTH1_A=1  
[goto TDAPPREG1_A]  
else [goto SHTTETANUS_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0100.00.3 Variable: TDAPPREG1_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

A Tdap vaccination is a tetanus booster shot that also includes pertussis (per-TUH-sis) or whooping cough vaccine. Earlier you said that you had a pregnancy that ended in a live birth during the past 12 months. Did you receive a Tdap vaccine during this pregnancy?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Female Sample Adults 18-49 or age is refused or don't know who had a live birth in the past 12 months

Skip Instructions:

<1>[goto next section]
<2,RF,DK> [goto SHTTETANUS_A]

2025 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0110.00.3 Variable: SHTTETANUS_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Have you received a tetanus shot in the past 10 years?

* **Read if necessary:** *There are currently two types of tetanus shots available. One is the TD or tetanus-diphtheria vaccine and the others are called Tdap or Adacel® or Boostrix®. They are similar except the Tdap shot also includes a pertussis (per-TUH-sis) or whooping cough vaccine.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who did not have a Tdap vaccine during a recent pregnancy or who said refused or don't know to Tdap vaccine question

Skip Instructions:

<1,2,RF,DK> if GEN.AGE_FINAL[PX_A] GE 50 [goto RSVSHOT_A]
else [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

IMS: Immunization

Question ID: IMS.0120.00.3 Variable: RSVSHOT_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

There is a vaccine available since 2023 for some people that helps prevent the respiratory virus called RSV. Have you received the RSV vaccine?

* **Read if necessary:** *This vaccine is also known as Arexvy® (ah-RECKS-vee), Abrysvo® (uh-BREEZ-voh) or MResvia® (em-REZZ-vee-uh).*

* **Read if necessary:** *RSV is also known as Respiratory Syncytial (sin-SHISH-uhl) Virus.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 50+

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

PTC: Physical and other therapeutic care

Question ID: PTC.0010.00.2 Variable: EYEEX12M_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 12 months, have you had an eye exam from an eye specialist such as an optometrist, ophthalmologist, or eye doctor?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto THERA12M_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PTC: Physical and other therapeutic care

Question ID: PTC.0020.00.2 Variable: THERA12M_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 12 months, did you receive physical therapy, speech therapy, rehabilitative therapy, or occupational therapy?

* **Read if necessary:** *Do not include mental health therapy.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto HOMEHC12M_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PTC: Physical and other therapeutic care

Question ID: PTC.0030.00.2 Variable: HOMEHC12M_A Interview Module: Adult Content Type: Rotating Core

Question Text:

During the past 12 months, did you receive care at home from a nurse or other health professional?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

ANX: Anxiety

Question ID: ANX.0010.00.1 Variable: ANXFREQ_A Interview Module: Adult Content Type: Annual Core

Question Text:

How often do you feel worried, nervous or anxious? Would you say daily, weekly, monthly, a few times a year, or never?

* If respondent asks whether they are to answer about their emotional states after taking mood-regulating medications, say: *"Please answer based on your usual use of medication."*

Fills:

Response:

1	Daily
2	Weekly
3	Monthly
4	A few times a year
5	Never
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> [goto ANXMED_A]

2025 National Health Interview Survey (NHIS) Questionnaire

ANX: Anxiety

Question ID: ANX.0020.00.1 Variable: ANXMED_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you take prescription medication for these feelings?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

```
<1,RF,DK> [goto ANXLEVEL_A]
<2> if ANXFREQ_A=5 [goto next section]
    else [goto ANXLEVEL_A]
```

2025 National Health Interview Survey (NHIS) Questionnaire

ANX: Anxiety

Question ID: ANX.0030.00.1 Variable: ANXLEVEL_A Interview Module: Adult Content Type: Annual Core

Question Text:

Thinking about the last time you felt worried, nervous or anxious, how would you describe the level of these feelings? Would you say a little, a lot, or somewhere in between?

Fills:

Response:

1	A little
2	A lot
3	Somewhere in between a little and a lot
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who feel worried, anxious, or nervous daily, weekly, monthly, a few times a year or don't know or refused how often OR who do take medication for these feelings or don't know or refused if they take medication for these feelings

Skip Instructions:

<1-3,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

DEP: Depression

Question ID: DEP.0010.00.1 Variable: DEPFREQ_A Interview Module: Adult Content Type: Annual Core

Question Text:

How often do you feel depressed? Would you say daily, weekly, monthly, a few times a year, or never?

* If respondent asks whether they are to answer about their emotional states after taking mood-regulating medications, say: "Please answer based on your usual use of medication."

Fills:

Response:

1	Daily
2	Weekly
3	Monthly
4	A few times a year
5	Never
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> [goto DEPMED_A]

2025 National Health Interview Survey (NHIS) Questionnaire

DEP: Depression

Question ID: DEP.0020.00.1 Variable: DEPMED_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you take prescription medication for depression?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,RF,DK> [goto DEPLEVEL_A]
<2> if DEPFREQ_A=5 [goto next section]
else [goto DEPLEVEL_A]

2025 National Health Interview Survey (NHIS) Questionnaire

DEP: Depression

Question ID: DEP.0030.00.1 Variable: DEPLEVEL_A Interview Module: Adult Content Type: Annual Core

Question Text:

Thinking about the last time you felt depressed, how depressed did you feel? Would you say a little, a lot, or somewhere in between?

Fills:

Response:

1	A little
2	A lot
3	Somewhere in between a little and a lot
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who feel depressed daily, weekly, monthly, a few times a year or refused or don't know how often they feel depressed OR who do take medication or refused or don't know if they take medication for depression.

Skip Instructions:

<1-3,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

MHC: Mental Health Care

Question ID: MHC.0010.00.1 Variable: MHRX_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, did you take prescription medication to help you with any other emotions or with your concentration, behavior or mental health?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have not taken medication for worry or don't know or refused if they have and have not taken medication for depression or don't know or refused if they have

Skip Instructions:

<1,2,RF,DK> [goto MHTRPY_A]

2025 National Health Interview Survey (NHIS) Questionnaire

MHC: Mental Health Care

Question ID: MHC.0020.00.1 Variable: MHTHRPY_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, did you receive counseling or therapy from a mental health professional such as a psychiatrist, psychologist, psychiatric nurse, or clinical social worker?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,RF,DK> [goto MHTPYNOW_A]
<2> [goto MHTHDLY_A]

2025 National Health Interview Survey (NHIS) Questionnaire

MHC: Mental Health Care

Question ID: MHC.0030.00.1 Variable: MHTPYNOW_A Interview Module: Adult Content Type: Annual Core

Question Text:

Are you currently receiving counseling or therapy from a mental health professional?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have received, or refused to answer or don't know if they have received counseling or therapy from a mental health professional in the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto MHTHDLY_A]

2025 National Health Interview Survey (NHIS) Questionnaire

MHC: Mental Health Care

Question ID: MHC.0040.00.1 Variable: MHTHDLY_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, have you DELAYED getting counseling or therapy from a mental health professional because of the cost?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto MHTHND_A]

2025 National Health Interview Survey (NHIS) Questionnaire

MHC: Mental Health Care

Question ID: MHC.0050.00.1 Variable: MHTHND_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, was there any time when you needed counseling or therapy from a mental health professional, but DID NOT GET IT because of the cost?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

PHQ: PHQ-8 Depression

Question ID: PHQ.0005.00.2 Variable: PHQINTRO_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Now I'm going to ask you about several problems. Please tell me how often you have been bothered, over the last 2 weeks, by any of the following problems. For each problem there are 4 possible answers: not at all, several days, more than half of the days, or nearly every day.

* Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto PHQ81_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PHQ: PHQ-8 Depression

Question ID: PHQ.0010.00.2 Variable: PHQ81_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Over the last two weeks, how often have you been bothered by

...little interest or pleasure in doing things?

Would you say not at all, several days, more than half the days, or nearly every day?

Fills:

Response:

1	Not at all
2	Several days
3	More than half the days
4	Nearly every day
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto PHQ82_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PHQ: PHQ-8 Depression

Question ID: PHQ.0020.00.2 Variable: PHQ82_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Over the last two weeks, how often have you been bothered by

...Feeling down, depressed, or hopeless?

Would you say not at all, several days, more than half the days, or nearly every day?

Fills:

Response:

1	Not at all
2	Several days
3	More than half the days
4	Nearly every day
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto PHQ83_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PHQ: PHQ-8 Depression

Question ID: PHQ.0030.00.2 Variable: PHQ83_A Interview Module: Adult Content Type: Rotating Core

Question Text:

* **Read if necessary:** *Over the last two weeks, how often have you been bothered by*

...Trouble falling or staying asleep, or sleeping too much?

* **Read if necessary:** *Would you say not at all, several days, more than half the days, or nearly every day?*

Fills:

Response:

1	Not at all
2	Several days
3	More than half the days
4	Nearly every day
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto PHQ84_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PHQ: PHQ-8 Depression

Question ID: PHQ.0040.00.2 Variable: PHQ84_A Interview Module: Adult Content Type: Rotating Core

Question Text:

* **Read if necessary:** *Over the last two weeks, how often have you been bothered by*

...Feeling tired or having little energy?

* **Read if necessary:** *Would you say not at all, several days, more than half the days, or nearly every day?*

Fills:

Response:

1	Not at all
2	Several days
3	More than half the days
4	Nearly every day
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto PHQ85_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PHQ: PHQ-8 Depression

Question ID: PHQ.0050.00.2 Variable: PHQ85_A Interview Module: Adult Content Type: Rotating Core

Question Text:

* **Read if necessary:** *Over the Last two weeks, how often have you been bothered by*

...Poor appetite or overeating?

* **Read if necessary:** *Would you say not at all, several days, more than half the days, or nearly every day?*

Fills:

Response:

1	Not at all
2	Several days
3	More than half the days
4	Nearly every day
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto PHQ86_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PHQ: PHQ-8 Depression

Question ID: PHQ.0060.00.2 Variable: PHQ86_A Interview Module: Adult Content Type: Rotating Core

Question Text:

* **Read if necessary:** *Over the last two weeks, how often have you been bothered by*

...Feeling bad about yourself, or that you are a failure, or have let yourself or your family down?

* **Read if necessary:** *Would you say not at all, several days, more than half the days, or nearly every day?*

Fills:

Response:

1	Not at all
2	Several days
3	More than half the days
4	Nearly every day
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto PHQ87_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PHQ: PHQ-8 Depression

Question ID: PHQ.0070.00.2 Variable: PHQ87_A Interview Module: Adult Content Type: Rotating Core

Question Text:

- * **Read if necessary:** *Over the last two weeks, how often have you been bothered by*
- ...Trouble concentrating on things, such as reading the newspaper or watching television?
- * **Read if necessary:** *Would you say not at all, several days, more than half the days, or nearly every day?*

Fills:

Response:

1	Not at all
2	Several days
3	More than half the days
4	Nearly every day
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto PHQ88_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PHQ: PHQ-8 Depression

Question ID: PHQ.0080.00.2 Variable: PHQ88_A Interview Module: Adult Content Type: Rotating Core

Question Text:

* **Read if necessary:** *Over the last two weeks, how often have you been bothered by*

...Moving or speaking so slowly that other people could have noticed? Or the opposite, being so fidgety or restless that you have been moving around a lot more than usual?

* **Read if necessary:** *Would you say not at all, several days, more than half the days, or nearly every day?*

Fills:

Response:

1	Not at all
2	Several days
3	More than half the days
4	Nearly every day
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

GAD: GAD-7 Anxiety

Question ID: GAD.0010.00.2 Variable: GAD71_A Interview Module: Adult Content Type: Rotating Core

Question Text:

Over the last two weeks, how often have you been bothered by the following problems

...Feeling nervous, anxious, or on edge?

Would you say not at all, several days, more than half the days, or nearly every day?

Fills:

Response:

1	Not at all
2	Several days
3	More than half the days
4	Nearly every day
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto GAD72_A]

2025 National Health Interview Survey (NHIS) Questionnaire

GAD: GAD-7 Anxiety

Question ID: GAD.0020.00.2 Variable: GAD72_A Interview Module: Adult Content Type: Rotating Core

Question Text:

* **Read if necessary:** *Over the last two weeks, how often have you been bothered by*

...Not being able to stop or control worrying?

* **Read if necessary:** *Would you say, not at all, several days, more than half the days, or nearly every day?*

Fills:

Response:

1	Not at all
2	Several days
3	More than half the days
4	Nearly every day
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto GAD73_A]

2025 National Health Interview Survey (NHIS) Questionnaire

GAD: GAD-7 Anxiety

Question ID: GAD.0030.00.2 Variable: GAD73_A Interview Module: Adult Content Type: Rotating Core

Question Text:

* **Read if necessary:** *Over the last two weeks, how often have you been bothered by*

...Worrying too much about different things?

* **Read if necessary:** *Would you say, not at all, several days, more than half the days, or nearly every day?*

Fills:

Response:

1	Not at all
2	Several days
3	More than half the days
4	Nearly every day
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto GAD74_A]

2025 National Health Interview Survey (NHIS) Questionnaire

GAD: GAD-7 Anxiety

Question ID: GAD.0040.00.2 Variable: GAD74_A Interview Module: Adult Content Type: Rotating Core

Question Text:

* **Read if necessary:** *Over the last two weeks, how often have you been bothered by*

...Trouble relaxing?

* **Read if necessary:** *Would you say, not at all, several days, more than half the days, or nearly every day?*

Fills:

Response:

1	Not at all
2	Several days
3	More than half the days
4	Nearly every day
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto GAD75_A]

2025 National Health Interview Survey (NHIS) Questionnaire

GAD: GAD-7 Anxiety

Question ID: GAD.0050.00.2 Variable: GAD75_A Interview Module: Adult Content Type: Rotating Core

Question Text:

* **Read if necessary:** *Over the last two weeks, how often have you been bothered by*

...Being so restless that it's hard to sit still?

* **Read if necessary:** *Would you say, not at all, several days, more than half the days, or nearly every day?*

Fills:

Response:

1	Not at all
2	Several days
3	More than half the days
4	Nearly every day
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto GAD76_A]

2025 National Health Interview Survey (NHIS) Questionnaire

GAD: GAD-7 Anxiety

Question ID: GAD.0060.00.2 Variable: GAD76_A Interview Module: Adult Content Type: Rotating Core

Question Text:

* **Read if necessary:** *Over the last two weeks, how often have you been bothered by*

...Becoming easily annoyed or irritable?

* **Read if necessary:** *Would you say, not at all, several days, more than half the days, or nearly every day?*

Fills:

Response:

1	Not at all
2	Several days
3	More than half the days
4	Nearly every day
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto GAD77_A]

2025 National Health Interview Survey (NHIS) Questionnaire

GAD: GAD-7 Anxiety

Question ID: GAD.0070.00.2 Variable: GAD77_A Interview Module: Adult Content Type: Rotating Core

Question Text:

* **Read if necessary:** *Over the last two weeks, how often have you been bothered by*

...Feeling afraid as if something awful might happen?

* **Read if necessary:** *Would you say, not at all, several days, more than half the days, or nearly every day?*

Fills:

Response:

1	Not at all
2	Several days
3	More than half the days
4	Nearly every day
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-4,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

PAI: Chronic Pain

Question ID: PAI.0010.00.2 Variable: PAIINTRO_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

The next question is about pain you may have had in the past three months.

* Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto PAIFRQ3M_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PAI: Chronic Pain

Question ID: PAI.0020.00.2 Variable: PAIFRQ3M_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

In the past three months, how often did you have pain? Would you say never, some days, most days, or every day?

* If respondent asks whether they are to answer about their pain when taking their medications, say: "Please answer based on your usual use of medication."

Fills:

Response:

1	Never
2	Some days
3	Most days
4	Every day
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,RF,DK> [goto next section]
<2,3,4> [goto PAIAMNT_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PAI: Chronic Pain

Question ID: PAI.0030.00.2 Variable: PAIAMNT_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Thinking about the last time you had pain, how much pain did you have? Would you say a little, a lot, or somewhere in between?

Fills:

Response:

1	A little
2	A lot
3	Somewhere in between a little and a lot
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had pain some days, most days, or every day in the past 3 months

Skip Instructions:

<1-3,RF,DK> [goto PAIOTCMEDS_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PAI: Chronic Pain

Question ID: PAI.0040.00.2 Variable: PAIWKLM3M_A Interview Module: Adult Content Type: Rotating Content

Question Text:

Over the past three months, how often did your pain limit your life or work activities? Would you say never, some days, most days, or every day?

Fills:

Response:

1	Never
2	Some days
3	Most days
4	Every day
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had pain some days, most days, or every day in the past 3 months

Skip Instructions:

<1-4,RF,DK> [goto PAIAFFM3M_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PAI: Chronic Pain

Question ID: PAI.0050.00.2 Variable: PAIAFFM3M_A Interview Module: Adult Content Type: Rotating Content

Question Text:

Over the past three months, how often did YOUR pain affect your family and significant others?
Would you say never, some days, most days, or every day?

Fills:

Response:

1	Never
2	Some days
3	Most days
4	Every day
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had pain some days, most days, or every day in the past 3 months

Skip Instructions:

<1-4,RF,DK> [goto PAIBACK3M_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PAI: Chronic Pain

Question ID: PAI.0060.00.2 Variable: PAIBACK3M_A Interview Module: Adult Content Type: Rotating Content

Question Text:

The next set of questions are about the amount of pain you experience in different locations.

Over the past three months, how much have you been bothered by

...Back pain?

Would you say not at all, a little, a lot, or somewhere in between?

Fills:

Response:

1	Not at all
2	A little
3	A lot
4	Somewhere in between a little and a lot
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had pain some days, most days, or every day in the past 3 months

Skip Instructions:

<1-4,RF,DK> [goto PAIULMB3M_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PAI: Chronic Pain

Question ID: PAI.0070.00.2 Variable: PAIULMB3M_A Interview Module: Adult Content Type: Rotating Content

Question Text:

* **Read if necessary:** *Over the past three months, how much have you been bothered by*

...Pain in your hands, arms, or shoulders?

* **Read if necessary:** *Would you say not at all, a little, a lot, or somewhere in between?*

Fills:

Response:

1	Not at all
2	A little
3	A lot
4	Somewhere in between a little and a lot
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had pain some days, most days, or every day in the past 3 months

Skip Instructions:

<1-4,RF,DK> [goto PAILLMB3M_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PAI: Chronic Pain

Question ID: PAI.0080.00.2 Variable: PAILLMB3M_A Interview Module: Adult Content Type: Rotating Content

Question Text:

* **Read if necessary:** *Over the past three months, how much have you been bothered by*

...Pain in your hips, knees, or feet?

* **Read if necessary:** *Would you say not at all, a little, a lot, or somewhere in between?*

Fills:

Response:

1	Not at all
2	A little
3	A lot
4	Somewhere in between a little and a lot
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had pain some days, most days, or every day in the past 3 months

Skip Instructions:

<1-4,RF,DK> [goto PAIHDFC3M_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PAI: Chronic Pain

Question ID: PAI.0090.00.2 Variable: PAIHDFC3M_A Interview Module: Adult Content Type: Rotating Content

Question Text:

* **Read if necessary:** *Over the past three months, how much have you been bothered by*

...Headache or migraine?

* **Read if necessary:** *Would you say not at all, a little, a lot, or somewhere in between?*

Fills:

Response:

1	Not at all
2	A little
3	A lot
4	Somewhere in between a little and a lot
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had pain some days, most days, or every day in the past 3 months

Skip Instructions:

<1-4,RF,DK> [goto PAIAPG3M_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PAI: Chronic Pain

Question ID: PAI.0100.00.2 Variable: PAIAPG3M_A Interview Module: Adult Content Type: Rotating Content

Question Text:

* **Read if necessary:** *Over the past three months, how much have you been bothered by*

...Abdominal, pelvic, or genital pain?

* **Read if necessary:** *Would you say not at all, a little, a lot, or somewhere in between?*

Fills:

Response:

1	Not at all
2	A little
3	A lot
4	Somewhere in between a little and a lot
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had pain some days, most days, or every day in the past 3 months

Skip Instructions:

<1-4,RF,DK> [goto PAIT00TH_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PAI: Chronic Pain

Question ID: PAI.0110.00.2 Variable: PAIT00TH3M_A Interview Module: Adult Content Type: Rotating Content

Question Text:

* **Read if necessary:** *Over the past three months, how much have you been bothered by*

...Toothache or jaw pain?

* **Read if necessary:** *Would you say not at all, a little, a lot, or somewhere in between?*

Fills:

Response:

1	Not at all
2	A little
3	A lot
4	Somewhere in between a little and a lot
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had pain some days, most days, or every day in the past 3 months

Skip Instructions:

<1-4,RF,DK> [goto PAIOTCMEDS_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PAI: Chronic Pain

Question ID: PAI.0120.00.3 Variable: PAIOTCMEDS_A Interview Module: Adult Content Type: Rotating Content

Question Text:

Over the past three months, did you use any of the following to manage your pain?

...Over-the-counter medications such as aspirin, Tylenol, Advil, or Aleve?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had pain at least some days in the past 3 months

Skip Instructions:

<1,2,RF,DK> [goto PAIOPIOID_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PAI: Chronic Pain

Question ID: PAI.0125.00.3 Variable: PAIOPIOID_A Interview Module: Adult Content Type: Rotating Content

Question Text:

?[F1]

Read if necessary: *Over the past three months, did you use any of the following to manage your pain?*

...An opioid pain reliever prescribed by a doctor, dentist, or other health professional?
Examples include codeine, hydrocodone, morphine, oxycodone, OxyContin, Percocet, and Percodan.
If you are not sure, please tell me the name of the drug and I can look it up.

- * Press F1 to pull up list of prescription opioids.
- * Enter '1' for yes, if any medications provided are on the list.
- * Enter '2' for no, if no medications provided are on the list.

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had pain at least some days in the past 3 months

Skip Instructions:

<1,2,RF,DK> [goto PAIPRSMEDS_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PAI: Chronic Pain

Question ID: PAI.0130.00.3 Variable: PAIPRSMEDS_A Interview Module: Adult Content Type: Rotating Content

Question Text:

* **Read if necessary:** *Over the past three months, did you use any of the following to manage your pain?*

...A pain reliever other than an opioid prescribed by a doctor, dentist, or other health professional?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had pain at least some days in the past 3 months

Skip Instructions:

<1,2,RF,DK> [goto PAIPHYSTPY_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PAI: Chronic Pain

Question ID: PAI.0140.00.3 Variable: PAIPHYSTPY_A Interview Module: Adult Content Type: Rotating Content

Question Text:

* **Read if necessary:** *Over the past three months, did you use any of the following to manage your pain?*

...Physical therapy, rehabilitative therapy, or occupational therapy?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had pain at least some days in the past 3 months

Skip Instructions:

<1,2,RF,DK> [goto PAICHIRO_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PAI: Chronic Pain

Question ID: PAI.0150.00.3 Variable: PAICHIRO_A Interview Module: Adult Content Type: Rotating Content

Question Text:

* **Read if necessary:** *Over the past three months, did you use any of the following to manage your pain?*

...Spinal manipulation or other forms of chiropractic care?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have pain at least some days

Skip Instructions:

<1,2,RF,DK> [goto PAITALKTPY_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PAI: Chronic Pain

Question ID: PAI.0160.00.3 Variable: PAITALKTPY_A Interview Module: Adult Content Type: Rotating Content

Question Text:

* **Read if necessary:** *Over the past three months, did you use any of the following to manage your pain?*

...Talk therapies such as cognitive-behavioral therapy (CBT)?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have pain at least some days

Skip Instructions:

<1,2,RF,DK> [goto PAIYOGA_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PAI: Chronic Pain

Question ID: PAI.0170.00.3 Variable: PAIYOGA_A Interview Module: Adult Content Type: Rotating Content

Question Text:

* **Read if necessary:** *Over the past three months, did you use any of the following to manage your pain?*

...Yoga, Tai Chi, or Qi Gong (chee-GONG)?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have pain at least some days

Skip Instructions:

<1,2,RF,DK> [goto PAIEXRCISE_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PAI: Chronic Pain

Question ID: PAI.0180.00.3 Variable: PAIEXRCISE_A Interview Module: Adult Content Type: Rotating Content

Question Text:

* **Read if necessary:** *Over the past three months, did you use any of the following to manage your pain?*

...Other forms of exercise, such as walking, swimming, bike riding, stretching, or strength training?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have pain at least some days

Skip Instructions:

<1,2,RF,DK> [goto PAIMASSAGE_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PAI: Chronic Pain

Question ID: PAI.0190.00.3 Variable: PAIMASSAGE_A Interview Module: Adult Content Type: Rotating Content

Question Text:

* **Read if necessary:** *Over the past three months, did you use any of the following to manage your pain?*

...Massage?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have pain at least some days

Skip Instructions:

<1,2,RF,DK> [goto PAIMEDITAT_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PAI: Chronic Pain

Question ID: PAI.0200.00.3 Variable: PAIMEDITAT_A Interview Module: Adult Content Type: Rotating Content

Question Text:

* **Read if necessary:** *Over the past three months, did you use any of the following to manage your pain?*

...Meditation, guided imagery, or other relaxation techniques?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have pain at least some days

Skip Instructions:

<1,2,RF,DK> [goto PAIMOTHER_A]

2025 National Health Interview Survey (NHIS) Questionnaire

PAI: Chronic Pain

Question ID: PAI.0210.00.3 Variable: PAIMOTHER_A Interview Module: Adult Content Type: Rotating Content

Question Text:

Over the past three months, did you use any other approaches to manage your pain?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have pain at least some days

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

TBI: Concussions - past 12 months

Question ID: TBI.0010.00.3 Variable: TBIINTRO1_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

The next questions are about head injuries that may have occurred in the past 12 months. Please think about all head injuries, for example, from playing sports, car accidents, falls, or being hit by something or someone that may have occurred in the past 12 months.

* Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto TBILCDCMG_A]

2025 National Health Interview Survey (NHIS) Questionnaire

TBI: Concussions - past 12 months

Question ID: TBI.0020.00.3 Variable: TBILCDCMG_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

During the past 12 months, as a result of a blow or jolt to the head, have you been knocked out or lost consciousness, been dazed or confused, or had a gap in your memory?

* **Read if necessary:** *Please think about all head injuries, for example, from playing sports, car accidents, falls, or being hit by something or someone that may have occurred in the past 12 months.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto TBIHLSBMC_A]

2025 National Health Interview Survey (NHIS) Questionnaire

TBI: Concussions - past 12 months

Question ID: TBI.0030.00.3 Variable: TBIHLSBMC_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

During the past 12 months, as a result of a blow or jolt to the head, have you had headaches, sensitivity to light or noise, balance problems, or changes in mood or behavior?

* **Read if necessary:** *Please think about all head injuries, for example, from playing sports, car accidents, falls, or being hit by something or someone that may have occurred in the past 12 months.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

```
<1> [goto TBISPORT_A]
<2,RF,DK> if TBILCDCMG_A=1 [goto TBISPORT_A]
elseif TBILCDCMG_A=2,RF,DK [goto next section]
```

2025 National Health Interview Survey (NHIS) Questionnaire

TBI: Concussions - past 12 months

Question ID: TBI.0040.00.3 Variable: TBISPORT_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

^CDCMG_A Were you playing a sport or participating in a physical or recreational activity, such as jogging, biking, or pick-up games, when you experienced any of these blows or jolts to the head?

* **Read if necessary:** Include team or league sports competitions or practices.

* **Read if necessary:** Include organized and non-organized sports.

* **Read if necessary:** A pick-up game is when a group of players get together and spontaneously start a game, like basketball or soccer.

Fills:

CDCMG_A	Description	Think about the blows or jolts to the head that caused you to lose consciousness...
	Instruction	If TBILCDCMG_A=1 and TBIHLSBMC_A=2,RF,DK, fill: "Think about the blows or jolts to the head that caused you to lose consciousness, become dazed or confused, or have a gap in your memory." else no fill

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who experienced TBI symptoms from a blow or jolt to the head over the past 12 months

Skip Instructions:

<1> [goto TBILEAGUE_A]
<2,RF,DK> [goto TBIEVAL_A]

2025 National Health Interview Survey (NHIS) Questionnaire

TBI: Concussions - past 12 months

Question ID: TBI.0050.00.3 Variable: TBILEAGUE_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Were you participating in an organized team or league sports competition or practice when you experienced any of these blows or jolts to the head?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who experienced TBI symptoms from a blow or jolt to the head over the past 12 months and had a sports or recreational injury

Skip Instructions:

<1,2,RF,DK> [goto TBIEVAL_A]

2025 National Health Interview Survey (NHIS) Questionnaire

TBI: Concussions - past 12 months

Question ID: TBI.0060.00.3 Variable: TBIEVAL_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

During the past 12 months, as a result of a blow or jolt to the head, were you evaluated for a concussion or brain injury by a doctor, nurse, paramedic, athletic trainer, or other health professional?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who experienced TBI symptoms from a blow or jolt to the head over the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

CIG: Cigarettes and E-cigarettes w/ Cigarette History

Question ID: CIG.0010.00.1 Variable: CIGINTRO_A Interview Module: Adult Content Type: Annual Core

Question Text:

These next questions are about cigarette smoking.

* Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto SMKEV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

CIG: Cigarettes and E-cigarettes w/ Cigarette History

Question ID: CIG.0020.00.1 Variable: SMKEV_A Interview Module: Adult Content Type: Annual Core

Question Text:

Have you smoked at least 100 cigarettes in your ENTIRE LIFE?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto SMKNOW_A]
<2,RF,DK> [goto ECIGEV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

CIG: Cigarettes and E-cigarettes w/ Cigarette History

Question ID: CIG.0030.00.1 Variable: SMKNOW_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you NOW smoke cigarettes every day, some days or not at all?

Fills:

Response:

1	Every day
2	Some days
3	Not at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who ever smoked 100 cigarettes

Skip Instructions:

<1> [goto CIGNOW_A]
<2> [goto SMK30D_A]
<3,RF,DK> [goto ECIGEV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

CIG: Cigarettes and E-cigarettes w/ Cigarette History

Question ID: CIG.0040.00.1 Variable: CIGNOW_A Interview Module: Adult Content Type: Annual Core

Question Text:

On average, about how many cigarettes do you NOW smoke a day?

* Enter '1' if less than 1 cigarette.

* Enter '95' if 95 or more cigarettes.

Fills:

Response:

01-95	Range of values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who are current every day smokers

Skip Instructions:

<1-95,RF,DK> [goto ECIGEV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

CIG: Cigarettes and E-cigarettes w/ Cigarette History

Question ID: CIG.0050.00.1 Variable: SMK30D_A Interview Module: Adult Content Type: Annual Core

Question Text:

On how many of the past 30 days did you smoke a cigarette?

* Enter '0' for None.

Fills:

Response:

00-30	Range of values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who are current some day smokers

Skip Instructions:

<0> [goto ECIGEV_A]
<1-30,RF,DK> [goto CIG30D_A]

2025 National Health Interview Survey (NHIS) Questionnaire

CIG: Cigarettes and E-cigarettes w/ Cigarette History

Question ID: CIG.0060.00.1 Variable: CIG30D_A Interview Module: Adult Content Type: Annual Core

Question Text:

On average, when you smoked during the past 30 days, about how many cigarettes did you smoke a day?

* Enter '1' if less than 1.

* Enter '95' if 95 or more cigarettes.

Fills:

Response:

01-95	Range of values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who have smoked any time in the past 30 days or refused or don't know

Skip Instructions:

<1-95,RF,DK> [goto ECIGEV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

CIG: Cigarettes and E-cigarettes w/ Cigarette History

Question ID: CIG.0090.00.1 Variable: ECIGEV_A Interview Module: Adult Content Type: Annual Core

Question Text:

Have you ever used an e-cigarette or other electronic vaping product, even just one time, in your entire life?

* **Read if necessary:** *Electronic cigarettes (e-cigarettes) and other electronic vaping products include JUULs, vape pens, e-cigars, and others. These products are battery-powered and usually contain nicotine and flavors such as fruit, mint, or candy.*

* **These questions concern electronic vaping products for nicotine use.**

* **Do not include marijuana use.**

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto ECIGNOW_A]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

CIG: Cigarettes and E-cigarettes w/ Cigarette History

Question ID: CIG.0100.00.1 Variable: ECIGNOW_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you NOW use e-cigarettes or other electronic vaping products every day, some days, or not at all?

* These questions concern electronic vaping products for nicotine use.

* Do not include marijuana use.

Fills:

Response:

1	Every day
2	Some days
3	Not at all
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have ever used e-cigarettes

Skip Instructions:

<1-3,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

OTB: Other Tobacco

Question ID: OTB.0010.00.3 Variable: CIGAREV_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Have you ever smoked a regular cigar, cigarillo, or a little filtered cigar EVEN ONE TIME?

* **Read if necessary:** "Cigarillos" are medium cigars that sometimes are sold with plastic or wooden tips. Some common brands are Black and Mild, Swisher Sweets, Dutch Masters and Phillies Blunts. Cigarillos are usually sold individually or in packs of 5 or fewer. Little filtered cigars look like cigarettes and are usually brown in color. Like cigarettes, little filtered cigars have a spongy filter and are sold in packs of 20. Some common brands are Prime Time and Winchester.

* **Read if necessary:** Do not include electronic cigars or e-cigars.

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample adults 18+

Skip Instructions:

<1> [goto CIGARCUR_A]
<2,RF,DK> [goto SMOKESEV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

OTB: Other Tobacco

Question ID: OTB.0020.00.3 Variable: CIGARCUR_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Do you NOW smoke regular cigars, cigarillos, or little filtered cigars every day, some days, or not at all?

Fills:

Response:

1	Every day
2	Some days
3	Not at all
7	Refused
9	Don't Know

Universe:

Sample adults 18+ who have ever smoked a regular cigar, cigarillo, or filtered cigar

Skip Instructions:

<1,RF,DK> [goto SMOKEELSEV_A]
<2,3> [goto CIGAR30D_A]

2025 National Health Interview Survey (NHIS) Questionnaire

OTB: Other Tobacco

Question ID: OTB.0030.00.3 Variable: CIGAR30D_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

On how many of the past 30 days have you smoked a regular cigar, cigarillo, or little filtered cigar?

Fills:

Response:

00-30	Range of values
97	Refused
99	Don't Know

Universe:

Sample adults 18+ who now smoke a regular cigar, cigarillo, or little filtered cigar some days or not at all

Skip Instructions:

<0-30,RF,DK> [goto SMOKEELSEV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

OTB: Other Tobacco

Question ID: OTB.0060.00.3 Variable: SMOKESEV1_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Smokeless tobacco products are placed in the mouth or nose and can include chewing tobacco, snuff, dip, snus (SNOOSE), nicotine pouches, or dissolvable tobacco.

Have you ever used smokeless tobacco products EVEN ONE TIME?

* **Read if necessary:** Do not include nicotine replacement therapy products such as patch, gum, lozenge, or spray, which are considered smoking cessation treatments.

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample adults 18+

Skip Instructions:

<1> [goto SMOKELESC1_A]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

OTB: Other Tobacco

Question ID: OTB.0070.00.3 Variable: SMOKELSCR1_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

Do you NOW use smokeless tobacco products every day, some days, or not at all?

Fills:

Response:

1	Every day
2	Some days
3	Not at all
7	Refused
9	Don't Know

Universe:

Sample adults 18+ who have ever used smokeless tobacco products

Skip Instructions:

<1-3,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

SSL: Social Support and Loneliness

Question ID: SSL.0005.00.3 Variable: SSLINTRO_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

The next questions are about social and emotional support.

* Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto SUPPORT_A]

2025 National Health Interview Survey (NHIS) Questionnaire

SSL: Social Support and Loneliness

Question ID: SSL.0010.00.3 Variable: SUPPORT_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

How often do you get the social and emotional support you need? Would you say always, usually, sometimes, rarely, or never?

Fills:

Response:

1	Always
2	Usually
3	Sometimes
4	Rarely
5	Never
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> [goto LONELY_A]

2025 National Health Interview Survey (NHIS) Questionnaire

SSL: Social Support and Loneliness

Question ID: SSL.0020.00.3 Variable: LONELY_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

How often do you feel lonely? Would you say always, usually, sometimes, rarely, or never?

Fills:

Response:

1	Always
2	Usually
3	Sometimes
4	Rarely
5	Never
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

SCI: Social Connectivity and Isolation

Question ID: SCI.0010.00.3 Variable: SCONNECT1_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

In a typical week, and not including people you live with, how many times do you get together with people that you care about and feel close to?

Fills:

Response:

0	Never or less than once a week
1	1 to 2 times
2	3 to 4 times
3	5 or more times
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<0-3,RF,DK> [goto SCONNECT2_A]

2025 National Health Interview Survey (NHIS) Questionnaire

SCI: Social Connectivity and Isolation

Question ID: SCI.0020.00.3 Variable: SCONNECT2_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

In a typical week, and not including people you live with, how many times do you talk on the telephone or by video with people that you care about and feel close to?

Fills:

Response:

0	Never or less than once a week
1	1 to 2 times
2	3 to 4 times
3	5 or more times
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<0-3,RF,DK> [goto SCONNECT3_A]

2025 National Health Interview Survey (NHIS) Questionnaire

SCI: Social Connectivity and Isolation

Question ID: SCI.0030.00.3 Variable: SCONNECT3_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

During the past 12 months, how many times did you attend religious services?

* **Read if necessary:** *Do not include special occasions such as weddings, funerals, or other special events.*

Fills:

Response:

0	Zero
1	1 to 3
2	4 to 11
3	12 or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<0-3,RF,DK> [goto SCONNECT4_A]

2025 National Health Interview Survey (NHIS) Questionnaire

SCI: Social Connectivity and Isolation

Question ID: SCI.0040.00.3 Variable: SCONNECT4_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

During the past 12 months, how many times did you attend meetings of clubs or organizations you belong to?

* **Read if necessary:** *Examples include community groups, unions, athletic groups, or school groups.*

Fills:

Response:

0	Zero, or does not belong to a group
1	1 to 3
2	4 to 11
3	12 or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<0-3,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

SPS: Social Parenting Support

Question ID: SPS.0010.00.4 Variable: PARENTCON1_A Interview Module: Adult Content Type: Emerging Content

Question Text:

The next questions are about your experiences being a parent and raising children. Specifically, we want you to think about the children in your home who are under 18 years of age.

How often do you get the social and emotional support you need with parenting and raising children? Would you say always, usually, sometimes, rarely, or never?

* If respondent says they are not a parent or are not raising children in the home, enter '6'.

Fills:

Response:

1	Always
2	Usually
3	Sometimes
4	Rarely
5	Never
6	Not a parent/not raising children in the home
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have a biological, step, adoptive or foster child in the household under age 18

Skip Instructions:

<1-5,RF,DK> [goto PARENTCON2_A]
<6> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

SPS: Social Parenting Support

Question ID: SPS.0020.00.4 Variable: PARENTCON2_A Interview Module: Adult Content Type: Emerging Content

Question Text:

How often do you find it difficult handling the day-to-day demands of parenting and raising children? Would you say every day, most days, some days, rarely, or never?

Fills:

Response:

1	Every day
2	Most days
3	Some days
4	Rarely
5	Never
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have a biological, step, adoptive or foster child in the household under age 18

Skip Instructions:

<1-5,RF,DK> [goto PARENTCON3_A]

2025 National Health Interview Survey (NHIS) Questionnaire

SPS: Social Parenting Support

Question ID: SPS.0030.00.4 Variable: PARENTCON3_A Interview Module: Adult Content Type: Emerging Content

Question Text:

How often do you talk, chat, or connect with other parents about your children or their children? Would you say every day, most days, some days, rarely, or never?

Fills:

Response:

1	Every day
2	Most days
3	Some days
4	Rarely
5	Never
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have a biological, step, adoptive or foster child in the household under age 18

Skip Instructions:

<1-5,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0010.00.3 **Variable:** VSLVYR1_A **Interview Module:** Adult **Content Type:** Sponsored Content

Question Text:

These next questions are about problems with your voice, swallowing, speech, or language.

During the past 12 months, did you have problems or difficulty with your VOICE, such as having a hoarse, raspy, tired, or strained voice, or trouble speaking loud enough to be heard?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto VSLVDYS_A]
<2,RF,DK> [goto VSLSWYR_A]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0020.00.3 **Variable:** VSLVDYS_A **Interview Module:** Adult **Content Type:** Sponsored Content

Question Text:

During the past 12 months, about how many days, weeks, or months did you have problems or difficulty with your voice?

* Do not read categories unless the respondent says they don't know, at which time you can read the wording in parentheses.

Fills:

Response:

1	1 to 6 days ("less than a week")
2	7 to 13 days ("one week or more, but less than two weeks")
3	14 to 29 days ("2 weeks or more, but less than a month")
4	30 to 89 days ("a month or more, but less than 3 months")
5	90 days to 179 days ("3 months or more, but less than 6 months")
6	180 days or more ("6 months or more")
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had a voice problem in the past 12 months

Skip Instructions:

<1-6,RF,DK> [goto VSLVDIF_A]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0030.00.3 **Variable:** VSLVDIF_A **Interview Module:** Adult **Content Type:** Sponsored Content

Question Text:

During the past 12 months, how much difficulty did you have with your voice? Would you say a little, a lot, or somewhere in between?

Fills:

Response:

1	A little
2	A lot
3	Somewhere in between
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had a voice problem in the past 12 months

Skip Instructions:

<1-3,RF,DK> [goto VSLSWYR_A]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0040.00.3 **Variable:** VSLSWYR_A **Interview Module:** Adult **Content Type:** Sponsored Content

Question Text:

During the past 12 months, did you have problems or difficulty with SWALLOWING, such as having difficulty eating solid food, taking pills, or drinking liquids?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto VSLSWDYS_A]
<2,RF,DK> [goto VSLSPYR_A]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0050.00.3 **Variable:** VSLSWDYS_A **Interview Module:** Adult **Content Type:** Sponsored Content

Question Text:

During the past 12 months, about how many days, weeks, or months did you have problems or difficulty with swallowing?

* Do not read categories unless the respondent says they don't know, at which time you can read the wording in parentheses.

Fills:

Response:

1	1 to 6 days ("less than a week")
2	7 to 13 days ("one week or more, but less than two weeks")
3	14 to 29 days ("2 weeks or more, but less than a month")
4	30 to 89 days ("a month or more, but less than 3 months")
5	90 days to 179 days ("3 months or more, but less than 6 months")
6	180 days or more ("6 months or more")
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had a swallowing problem in the past 12 months

Skip Instructions:

<1-6,RF,DK> [goto VSLSWDIF_A]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0060.00.3 **Variable:** VSLSWDIF_A **Interview Module:** Adult **Content Type:** Sponsored Content

Question Text:

During the past 12 months, how much difficulty did you have with swallowing? Would you say a little, a lot, or somewhere in between?

Fills:

Response:

1	A little
2	A lot
3	Somewhere in between
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had a swallowing problem in the past 12 months

Skip Instructions:

<1-3,RF,DK> [goto VSLSPYR_A]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0070.00.3 **Variable:** VSLSPYR_A **Interview Module:** Adult **Content Type:** Sponsored Content

Question Text:

During the past 12 months, did you have problems or difficulty with your SPEECH, such as stuttering, repeating words, or not being able to pronounce words correctly?

* **Read if necessary:** *This refers to the language you are most comfortable with, not a second or third language.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto VSLSPDYS_A]
<2,RF,DK> [goto VSLLGYR_A]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0080.00.3 **Variable:** VSLSPDYS_A **Interview Module:** Adult **Content Type:** Sponsored Content

Question Text:

During the past 12 months, about how many days, weeks, or months did you have problems or difficulty with your speech?

* Do not read categories unless the respondent says they don't know, at which time you can read the wording in parentheses.

Fills:

Response:

1	1 to 6 days ("less than a week")
2	7 to 13 days ("one week or more, but less than two weeks")
3	14 to 29 days ("2 weeks or more, but less than a month")
4	30 to 89 days ("a month or more, but less than 3 months")
5	90 days to 179 days ("3 months or more, but less than 6 months")
6	180 days or more ("6 months or more")
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had a speech problem in the past 12 months

Skip Instructions:

<1-6,RF,DK> [goto VSLSPDIF_A]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0090.00.3 **Variable:** VSLSPDIF_A **Interview Module:** Adult **Content Type:** Sponsored Content

Question Text:

During the past 12 months, how much difficulty did you have with your speech? Would you say a little, a lot, or somewhere in between?

Fills:

Response:

1	A little
2	A lot
3	Somewhere in between
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had a speech problem in the past 12 months

Skip Instructions:

<1-3,RF,DK> [goto VSLSPST_A]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0100.00.3 **Variable:** VSLSPST_A **Interview Module:** Adult **Content Type:** Sponsored Content

Question Text:

During the past 12 months, did your speech problems or difficulty include stuttering, trouble pronouncing words correctly, or both?

Fills:

Response:

1	Stuttering
2	Trouble pronouncing words correctly
3	Both
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had a speech problem in the past 12 months

Skip Instructions:

<1-3,RF,DK> [goto VSLG_YR_A]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0110.00.3 **Variable:** VSLG_YR_A **Interview Module:** Adult **Content Type:** Sponsored Content

Question Text:

During the past 12 months, did you have problems or difficulty with LANGUAGE, such as difficulty using, learning, or understanding words, sentences, or conversational interactions?

* **Read if necessary:** *This refers to the language you are most comfortable with, not a second or third language.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto VSLG_DYS_A]
<2,RF,DK> if VSLV_YR1_A=1 or VSLSW_YR_A=1 or VSLSP_YR_A=1 [goto VSLBRAIN_A]
else [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0120.00.3 **Variable:** VSLLGDYS_A **Interview Module:** Adult **Content Type:** Sponsored Content

Question Text:

During the past 12 months, about how many days, weeks, or months did you have problems or difficulty with language?

* Do not read categories unless the respondent says they don't know, at which time you can read the wording in parentheses.

Fills:

Response:

1	1 to 6 days ("less than a week")
2	7 to 13 days ("one week or more, but less than two weeks")
3	14 to 29 days ("2 weeks or more, but less than a month")
4	30 to 89 days ("a month or more, but less than 3 months")
5	90 days to 179 days ("3 months or more, but less than 6 months")
6	180 days or more ("6 months or more")
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had a language problem in the past 12 months

Skip Instructions:

<1-6,RF,DK> [goto VSLLGDIF_A]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0130.00.3 **Variable:** VSLLGDIFF_A **Interview Module:** Adult **Content Type:** Sponsored Content

Question Text:

During the past 12 months, how much difficulty did you have with language? Would you say a little, a lot, or somewhere in between?

Fills:

Response:

1	A little
2	A lot
3	Somewhere in between
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had a language problem in the past 12 months

Skip Instructions:

<1-3,RF,DK> [goto VSLBRAIN_A]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0140.00.3 **Variable:** VSLBRAIN_A **Interview Module:** Adult **Content Type:** Sponsored Content

Question Text:

Did any of your ^VSLTYPE_A problems or difficulty follow a head or brain injury or stroke?

Fills:

VSLTYPE_A	Description	voice/swallowing/speech/language
	Instruction	If VSLVYR1_A=1 and VSLSWYR_A=1 and VSLSPYR_A=1 and VSLG_YR_A=1, fill: "voice, swallowing, speech, and language" Elseif VSLSWYR_A=1 and VSLSPYR_A=1 and VSLG_YR_A=1, fill: "swallowing, speech, and language" Elseif VSLVYR1_A=1 and VSLSPYR_A=1 and VSLG_YR_A=1, fill: "voice, speech, and language" Elseif VSLVYR1_A=1 and VSLSWYR_A=1 and VSLG_YR_A=1, fill: "voice, swallowing, and language" Elseif VSLVYR1_A=1 and VSLSWYR_A=1 and VSLSPYR_A=1, fill: "voice, swallowing, and speech" Elseif VSLVYR1_A=1 and VSLSWYR_A=1, fill: "voice and swallowing" Elseif VSLVYR1_A=1 and VSLSPYR_A=1, fill: "voice and speech" Elseif VSLVYR1_A=1 and VSLG_YR_A=1, fill: "voice and language" Elseif VSLSWYR_A=1 and VSLSPYR_A=1, fill: "swallowing and speech" Elseif VSLSWYR_A=1 and VSLG_YR_A=1, fill: "swallowing and language" Elseif VSLSPYR_A=1 and VSLG_YR_A=1, fill: "speech and language" Elseif VSLVYR1_A=1, fill: "voice" Elseif VSLSWYR_A=1, fill: "swallowing" Elseif VSLSPYR_A=1, fill: "speech" Elseif VSLG_YR_A=1, fill: "language"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had a voice, swallowing, speech, or language problem in the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto VSLPA_A]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0150.00.3 **Variable:** VSLPA_A **Interview Module:** Adult **Content Type:** Sponsored Content

Question Text:

During the past 12 months, did you see a speech-language pathologist, doctor, or other health care professional for evaluation, treatment, or rehabilitation services of your ^VSLTYPE_A problems or difficulty?

** **Read if necessary:** Health care professionals can include early intervention specialists, ENT doctors, otolaryngologists, audiologists, rehabilitation specialists, occupational or physical therapists, internal medicine doctors, neurologists, gerontologists, and others.*

Fills:

VSLTYPE_A	Description	voice/swallowing/speech/language
	Instruction	If VSLVYR1_A=1 and VLSWYR_A=1 and VSLSPYR_A=1 and VSLLGYR_A=1, fill: "voice, swallowing, speech, and language" Elseif VLSWYR_A=1 and VSLSPYR_A=1 and VSLLGYR_A=1, fill: "swallowing, speech, and language" Elseif VSLVYR1_A=1 and VSLSPYR_A=1 and VSLLGYR_A=1, fill: "voice, speech, and language" Elseif VSLVYR1_A=1 and VLSWYR_A=1 and VSLLGYR_A=1, fill: "voice, swallowing, and language" Elseif VSLVYR1_A=1 and VLSWYR_A=1 and VSLSPYR_A=1, fill: "voice, swallowing, and speech" Elseif VSLVYR1_A=1 and VLSWYR_A=1, fill: "voice and swallowing" Elseif VSLVYR1_A=1 and VSLSPYR_A=1, fill: "voice and speech" Elseif VSLVYR1_A=1 and VSLLGYR_A=1, fill: "voice and language" Elseif VLSWYR_A=1 and VSLSPYR_A=1, fill: "swallowing and speech" Elseif VLSWYR_A=1 and VSLLGYR_A=1, fill: "swallowing and language" Elseif VSLSPYR_A=1 and VSLLGYR_A=1, fill: "speech and language" Elseif VSLVYR1_A=1, fill: "voice" Elseif VLSWYR_A=1, fill: "swallowing" Elseif VSLSPYR_A=1, fill: "speech" Elseif VSLLGYR_A=1, fill: "language"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had a voice, swallowing, speech, or language problem in the past 12 months

Skip Instructions:

<1> [goto VSLPALF_A]
<2,RF,DK> [goto VSLBTWR_A]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0160.00.3 **Variable:** VSLPALF_A **Interview Module:** Adult **Content Type:** Sponsored Content

Question Text:

How did those evaluation, treatment, or rehabilitation services affect your life as a whole? Has your life improved greatly, improved somewhat, stayed the same, or gotten worse?

Fills:

Response:

1	Improved greatly
2	Improved somewhat
3	Stayed the same
4	Gotten worse
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who saw a speech-language pathologist or doctor for treatment

Skip Instructions:

<1-4,RF,DK> [goto VSLBTWR_A]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0170.00.3 **Variable:** VSLBTWR_A **Interview Module:** Adult **Content Type:** Sponsored Content

Question Text:

During the past 12 months, did your problems or difficulty with ^VSLTYPE_A get a lot better, get a little better, stay the same, get a little worse, or get a lot worse?

Fills:

VSLTYPE_A	Description	voice/swallowing/speech/language
	Instruction	If VSLVYR1_A=1 and VLSWYR_A=1 and VSLSPYR_A=1 and VSLGYZR_A=1, fill: "voice, swallowing, speech, and language" Elseif VLSWYR_A=1 and VSLSPYR_A=1 and VSLGYZR_A=1, fill: "swallowing, speech, and language" Elseif VSLVYR1_A=1 and VSLSPYR_A=1 and VSLGYZR_A=1, fill: "voice, speech, and language" Elseif VSLVYR1_A=1 and VLSWYR_A=1 and VSLGYZR_A=1, fill: "voice, swallowing, and language" Elseif VSLVYR1_A=1 and VLSWYR_A=1 and VSLSPYR_A=1, fill: "voice, swallowing, and speech" Elseif VSLVYR1_A=1 and VLSWYR_A=1, fill: "voice and swallowing" Elseif VSLVYR1_A=1 and VSLSPYR_A=1, fill: "voice and speech" Elseif VSLVYR1_A=1 and VSLGYZR_A=1, fill: "voice and language" Elseif VLSWYR_A=1 and VSLSPYR_A=1, fill: "swallowing and speech" Elseif VLSWYR_A=1 and VSLGYZR_A=1, fill: "swallowing and language" Elseif VSLSPYR_A=1 and VSLGYZR_A=1, fill: "speech and language" Elseif VSLVYR1_A=1, fill: "voice" Elseif VLSWYR_A=1, fill: "swallowing" Elseif VSLSPYR_A=1, fill: "speech" Elseif VSLGYZR_A=1, fill: "language"

Response:

1	Get a lot better
2	Get a little better
3	Stay the same
4	Get a little worse
5	Get a lot worse
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who had a voice, swallowing, speech, or language problem in the past 12 months

Skip Instructions:

<1-5,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

ORN: Sexual Orientation

Question ID: ORN.0010.00.1 Variable: ORNINTRO_A Interview Module: Adult Content Type: Annual Core

Question Text:

Next we have some questions about your demographic characteristics, including sexual orientation, gender identity, income, employment, and veteran status. Like all your answers, these will be used to understand the health of different groups in the population and will be kept confidential.

* Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto ORIENT_A]

2025 National Health Interview Survey (NHIS) Questionnaire

ORN: Sexual Orientation

Question ID: ORN.0020.00.1 Variable: ORIENT_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you think of yourself as ^gaylesbian; straight, that is, not ^gaylesbian; bisexual; something else; or you don't know the answer?

Fills:

gaylesbian	Description	gay/lesbian or gay
	Instruction	If GEN.SEX_FINAL=1 fill "gay"; else if GEN.SEX_FINAL='2',RF,DK fill "lesbian or gay"

Response:

1	^GayLesbian
2	Straight, that is, not ^gaylesbian
3	Bisexual
4	Something else
5	I don't know the answer
7	Refused

Universe:

Sample Adults 18+

Skip Instructions:

<1-3,RF> [goto next section]
<4,5> [goto ORIENTSP_A]

2025 National Health Interview Survey (NHIS) Questionnaire

ORN: Sexual Orientation

Question ID: ORN.0030.00.1 Variable: ORIENTSP_A Interview Module: Adult Content Type: Annual Core

Question Text:

Could you tell me what you mean by ^ORIENTSP?

^ORIENTSPDK

Fills:

ORIENTSP	Description	something else/don't know
	Instruction	if ORIENT_A=4, fill "something else" elseif ORIENT_A=5, fill "don't know"
ORIENTSPDK	Description	RIN you don't understand the words or in process of figuring out sexuality
	Instruction	if ORIENT_A=5, fill "* Read if necessary: For example, you don't understand the words, or you understand the words, but you have not figured out or are in the process of figuring out your sexuality?" else, no fill

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who answer something else or don't know to sexual orientation

Skip Instructions:

<verbatim,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

MAR: Marital Status

Question ID: MAR.0010.00.1 Variable: MARITAL_A Interview Module: Adult Content Type: Annual Core

Question Text:

The next questions are about marriage and cohabitation. Are you now married, living with a partner together as an unmarried couple, or neither?

* If respondent answers both married and living with a different partner together as an unmarried couple, enter living with partner.

Fills:

Response:

1	Married
2	Living with a partner together as an unmarried couple
3	Neither
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ and the Child PAR section has not been completed for the Sample Adult or the Child PAR section has been completed for the Sample Adult and the Sample Adult is not the Sample Child respondent

Skip Instructions:

<1> [goto SPOUSLIV_A]
 <2> if GEN.PCNT16PLUS=1 [got ERR1_MARITAL_A] else [goto PARTNERWHO_A]
 <3,RF,DK> [goto EVRMARRIED_A]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_MARITAL_A	One person eligible to be living with a partner in household soft edit	{signal ERR1_MARITAL_A} Respondent is the only person 16 or older on the household roster. There is no one else eligible to select.

2025 National Health Interview Survey (NHIS) Questionnaire

MAR: Marital Status

Question ID: MAR.0020.00.1 Variable: SPOUSLIV_A Interview Module: Adult Content Type: Annual Core

Question Text:

Does your spouse live here?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who are married

Skip Instructions:

<1> if GEN.PCNT16PLUS=1 [goto ERR1_SPOUSLIV_C] else [goto SPOUSWHO_A]
<2> [goto SPOUSEP_A]
<RF,DK> [goto next section]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_SPOUSLIV_C	Only one person eligible to be married in household soft edit	{signal ERR1_SPOUSLIV_C} Respondent is the only person 16 or older on the household roster. There is no one else eligible to select.

2025 National Health Interview Survey (NHIS) Questionnaire

MAR: Marital Status

Question ID: MAR.0030.00.1 Variable: SPOUSWHO_A Interview Module: Adult Content Type: Annual Core

Question Text:

Which person is your spouse?

* Enter line number of spouse.

* Deleted persons cannot be selected. Enter '0' if respondent wishes to select a deleted person.

Fills:

Response:

00	Not on roster
01-25	Person Number
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ with spouse in household

Skip Instructions:

<0-25> [goto SPOUSSEX_A]

<RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

MAR: Marital Status

Question ID: MAR.0040.00.1 Variable: SPOUSSEX_A Interview Module: Adult Content Type: Annual Core

Question Text:

I previously recorded ^SPOUSENAME's ^spousesex. Is this correct?

Fills:

SPOUSENAME	Description	Name of spouse
	Instruction	Fill name of spouse selected at SPOUSWHO_A
spousesex	Description	sex is male/sex is female/sex was not provided
	Instruction	if GEN.SEX_FINAL[person selected at SPOUSWHO_A]=1, fill "sex is male" if GEN.SEX_FINAL[person selected at SPOUSWHO_A]=2, fill "sex is female" if GEN.SEX_FINAL[person selected at SPOUSWHO_A] IN (DK,RF), fill "sex was not provided"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with spouse in household who entered a line number for their spouse

Skip Instructions:

<1,RF,DK> [goto next section]
<2> [goto SPOUNEWSEX_A]

2025 National Health Interview Survey (NHIS) Questionnaire

MAR: Marital Status

Question ID: MAR.0050.00.1 Variable: SPOUNWSEX_A Interview Module: Adult Content Type: Annual Core

Question Text:

Is ^SPOUSENAME male or female?

Fills:

SPOUSENAME	Description	Name of spouse
	Instruction	Fill name of spouse selected at SPOUSWHO_A

Response:

1	Male
2	Female
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with spouse with incorrect sex

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

MAR: Marital Status

Question ID: MAR.0060.00.1 Variable: SPOUSEP_A Interview Module: Adult Content Type: Annual Core

Question Text:

Does your spouse not live here because you and your spouse are legally separated?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ whose spouse does not live in the household

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

MAR: Marital Status

Question ID: MAR.0070.00.1 Variable: PARTNERWHO_A Interview Module: Adult Content Type: Annual Core

Question Text:

Which person is your partner?

* Enter line number of partner.

* Deleted persons cannot be selected. Enter '0' if respondent wishes to select a deleted person.

Fills:

Response:

00	Not on roster
01-25	Person Number
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who are living with unmarried partner in household

Skip Instructions:

<0-25> [goto PARTNERSEX_A]
<RF,DK> [goto EVRMARRIED_A]

2025 National Health Interview Survey (NHIS) Questionnaire

MAR: Marital Status

Question ID: MAR.0080.00.1 Variable: PARTNERSEX_A Interview Module: Adult Content Type: Annual Core

Question Text:

I previously recorded ^PARTNERNAME's ^partnersex. Is this correct?

Fills:

PARTNERNAME	Description	Name of partner
	Instruction	Fill name of partner selected at PARTNERWHO_A
partnersex	Description	sex is male/sex is female/sex was not provided
	Instruction	if GEN.SEX_FINAL[person selected at PARTNERWHO_A]=1, fill "sex is male" if GEN.SEX_FINAL[person selected at PARTNERWHO_A]=2, fill "sex is female" if GEN.SEX_FINAL[person selected at PARTNERWHO_A] IN (DK,RF), fill "sex was not provided"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with partner in household who entered a line number for their partner

Skip Instructions:

<1,RF,DK> [goto EVRMARRIED_A]
<2> [goto PARTNEWSEX_A]

2025 National Health Interview Survey (NHIS) Questionnaire

MAR: Marital Status

Question ID: MAR.0090.00.1 Variable: PARTNEWSEX_A Interview Module: Adult Content Type: Annual Core

Question Text:

Is ^PARTNERNAME male or female?

Fills:

PARTNERNAME	Description	Name of partner
	Instruction	Fill name of partner selected at PARTNERWHO_A

Response:

1	Male
2	Female
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with partner with incorrect sex

Skip Instructions:

<1,2,RF,DK> [goto EVRMARRIED_A]

2025 National Health Interview Survey (NHIS) Questionnaire

MAR: Marital Status

Question ID: MAR.0100.00.1 Variable: EVRMARRIED_A Interview Module: Adult Content Type: Annual Core

Question Text:

Have you ever been married?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who are living with unmarried partner or who are not married or living with an unmarried partner or refused or don't know

Skip Instructions:

```
<1> if MARITAL_A=2 [goto LEGALSTAT_A]
elseif MARITAL_A=3 [goto WIDIVSEP_A]
else [goto next section]
<2,RF,DK> [goto next section]
```

2025 National Health Interview Survey (NHIS) Questionnaire

MAR: Marital Status

Question ID: MAR.0110.00.1 Variable: LEGALSTAT_A Interview Module: Adult Content Type: Annual Core

Question Text:

What is your current legal marital status? Are you married, widowed, divorced, or separated?

Fills:

Response:

1	Married
2	Widowed
3	Divorced
4	Separated
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who are living with a partner but have been married

Skip Instructions:

<1-4,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

MAR: Marital Status

Question ID: MAR.0120.00.1 Variable: WIDIVSEP_A Interview Module: Adult Content Type: Annual Core

Question Text:

Are you widowed, divorced, or separated?

Fills:

Response:

1	Widowed
2	Divorced
3	Separated
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who are neither living with a partner nor married, but have been married

Skip Instructions:

<1-3,RF,DK> [goto FINISH_MAR_A]

2025 National Health Interview Survey (NHIS) Questionnaire

MAR: Marital Status

Question ID: MAR.0130.00.1 Variable: FINISH_MAR_A Interview Module: Adult Content Type: Annual Core

Question Text:

* The Sample Adult MAR section is now complete.

* Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Adults 18+ and the Child PAR section has not been completed for the Sample Adult or the Child PAR section has been completed for the Sample Adult and the Sample Adult is not the Sample Child respondent

Skip Instructions:

<1> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

VET: Veterans Status

Question ID: VET.0010.00.1 Variable: AFVET_A Interview Module: Adult Content Type: Annual Core

Question Text:

Did you ever serve on active duty in the U.S. Armed Forces, military Reserves, or National Guard?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto AFVETTRN_A]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

VET: Veterans Status

Question ID: VET.0020.00.1 Variable: AFVETTRN_A Interview Module: Adult Content Type: Annual Core

Question Text:

Were you on active duty ONLY for training in the Reserves or National Guard?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have ever served in the armed forces

Skip Instructions:

<1> [goto VADISB_A]
<2,RF,DK> [goto COMBAT_A]

2025 National Health Interview Survey (NHIS) Questionnaire

VET: Veterans Status

Question ID: VET.0030.00.1 Variable: COMBAT_A Interview Module: Adult Content Type: Annual Core

Question Text:

Did you ever serve in a foreign country during a time of armed conflict or on a humanitarian or peace-keeping mission?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have ever served in the armed forces and who were not only activated for training in the Reserves or National Guard

Skip Instructions:

<1,2,RF,DK> [goto VADISB_A]

2025 National Health Interview Survey (NHIS) Questionnaire

VET: Veterans Status

Question ID: VET.0040.00.1 Variable: VADISB_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you have a VA service-connected disability rating?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have ever served in the armed forces

Skip Instructions:

<1,2,RF,DK> [goto VAHOSP_A]

2025 National Health Interview Survey (NHIS) Questionnaire

VET: Veterans Status

Question ID: VET.0050.00.1 Variable: VAHOSP_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, did you receive any care at a Veteran's Health Administration facility or receive any other health care paid for by the VA?

* **Read if necessary:** *Veteran's Health Administration facilities include VA hospitals, VA medical centers, VA outpatient clinics, and VA nursing homes.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have ever served in the armed forces

Skip Instructions:

<1> [goto next section]
<2,RF,DK> if 1 IN Adult.INS.MILSPC_A [goto next section]
else [goto VACAREEV]

2025 National Health Interview Survey (NHIS) Questionnaire

VET: Veterans Status

Question ID: VET.0060.00.1 Variable: VACAREEV_A Interview Module: Adult Content Type: Annual Core

Question Text:

Have you ever enrolled in or used VA health care?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who have ever served in the armed forces and did not receive care at a VHA facility or other health care paid for by the VA in the past 12 months and did not report VA health care when asked about insurance

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

NAT: Nativity

Question ID: NAT.0010.00.1 Variable: NATUSBORN_A Interview Module: Adult Content Type: Annual Core

Question Text:

^Askverify_A Were you born in the United States or a U.S. territory?

Fills:

Askverify_A	Description	FR Instruction
	Instruction	If GEN.SARESPSC_FLG=1, fill "* Ask or verify:"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto NATSTBORN_A]
<2> [goto NATUSYR_A]
<RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

NAT: Nativity

Question ID: NAT.0020.00.1 **Variable:** NATSTBORN_A **Interview Module:** Adult **Content Type:** Annual Core

Question Text:

In what state or U.S. territory were you born?

Fills:

Response:

AK	Alaska
AL	Alabama
AZ	Arizona
AR	Arkansas
CA	California
CO	Colorado
CT	Connecticut
DE	Delaware
DC	District of Columbia
FL	Florida
GA	Georgia
GU	Guam
HI	Hawaii
ID	Idaho
IL	Illinois
IN	Indiana
IA	Iowa
KS	Kansas
KY	Kentucky
LA	Louisiana
ME	Maine
MD	Maryland
MA	Massachusetts
MI	Michigan
MN	Minnesota
MS	Mississippi
MO	Missouri
MT	Montana
NV	Nevada
NH	New Hampshire

NJ	New Jersey
NM	New Mexico
NY	New York
NC	North Carolina
ND	North Dakota
OH	Ohio
OK	Oklahoma
OR	Oregon
PA	Pennsylvania
PR	Puerto Rico
RI	Rhode Island
SC	South Carolina
SD	South Dakota
TN	Tennessee
TX	Texas
UT	Utah
VT	Vermont
VA	Virginia
VI	U.S. Virgin Islands
WA	Washington
WV	West Virginia
WI	Wisconsin
WY	Wyoming
AS	American Samoa
MP	Northern Mariana Islands
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ born in the United States or U.S. territory

Skip Instructions:

<American Samoa> [goto CITIZEN_A]
else [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

NAT: Nativity

Question ID: NAT.0040.00.1 Variable: NATUSYR_A Interview Module: Adult Content Type: Annual Core

Question Text:

In what year did you come to the United States to stay?

Fills:

Response:

Year	Year
9997	Refused
9999	Don't Know

Universe:

Sample Adults 18+ not born in the United States or U.S. territory

Skip Instructions:

<1900-Current Year,RF,DK> if NATUSYR_A is a future year [goto ERR1_NATUSYR_A]
if NATUSYR_A lt VFY.BYEAR_A [goto ERR2_NATUSYR_A]
else [goto CITIZEN_A]

Hard Edit:

Check Text	Check Description	Check Text
ERR2_NATUSYR_A	Year prior to birth hard edit	{check ERR2_NATUSYR_A} Year is prior to date of birth. Please correct.
ERR1_NATUSYR_A	Future year hard edit	{check ERR1_NATUSYR_A} Future year invalid. Please correct.

2025 National Health Interview Survey (NHIS) Questionnaire

NAT: Nativity

Question ID: NAT.0050.00.1 Variable: CITIZEN_A Interview Module: Adult Content Type: Annual Core

Question Text:

Are you a citizen of the United States?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ not born in the United States or U.S. territory or born in American Samoa

Skip Instructions:

<1> [goto NATCTZN_A]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

NAT: Nativity

Question ID: NAT.0060.00.1 Variable: NATCTZN_A Interview Module: Adult Content Type: Annual Core

Question Text:

Were you born abroad to an American parent, born abroad and adopted by an American parent, or did you become a U.S. citizen by naturalization?

Fills:

Response:

1	Born abroad to American parent
2	Born abroad and adopted by an American parent
3	Became U.S. citizen by naturalization
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ not born in the United States or a United States territory or born in the U.S. territory of American Samoa but are U.S. citizens

Skip Instructions:

<1-3,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

LNG: Language Spoken at Home

Question ID: LNG.0010.00.4 Variable: LANGHM_A Interview Module: Adult Content Type: Emerging Content

Question Text:

* If the interview is being conducted in a language other than English, do not read this question and enter '1' for yes.

Do you speak a language other than English at home?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto LANGSPEC_A]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

LNG: Language Spoken at Home

Question ID: LNG.0020.00.4 **Variable:** LANGSPEC_A **Interview Module:** Adult **Content Type:** Emerging Content

Question Text:

* If the interview is being conducted in a language other than English, do not read this question and enter the other language.

What other language do you speak most often at home?

Fills:

Response:

AMHARIC	Amharic
ARABIC	Arabic
ARMENIAN	Armenian
BENGALI	Bengali
CHINESE	Chinese
CROATIAN	Croatian
CZECH	Czech
DUTCH	Dutch
FINNISH	Finnish
FORMOSAN	Formosan
FRENCH CREOLE	French Creole
FRENCH	French
GERMAN	German
GREEK	Greek
GUJARATHI	Gujarathi
HATIAN	Hatian
HEBREW	Hebrew
HINDI (URDU)	Hindi (Urdu)
HMONG	Hmong
HUNGARIAN	Hungarian
ILOCANO	Ilocano
INDONESIAN	Indonesian
ITALIAN	Italian
JAPANESE	Japanese
KOREAN	Korean
KRU	Kru
LITHUANIAN	Lithuanian
MALAYALAM	Malayalam
MANDARIN	Mandarin

MIN NAN CHINESE	Min Nan Chinese
MON-KHMER (CAMBODIAN)	Mon-Khmer (Cambodian)
NAVAHO	Navaho
NORWEGIAN	Norwegian
PANJAB	Panjab
PENNSYLVANIA DUTCH	Pennsylvania Dutch
PERSIAN	Persian
POLISH	Polish
PORTUGUESE	Portuguese
RUMANIAN	Rumanian
RUSSIAN	Russian
SAMOAN	Samoan
SERBOCROATIAN	Serbocroatian
SLOVAK	Slovak
SOMALI	Somali
SPANISH	Spanish
SWEDISH	Swedish
SYRIAC	Syriac
TAGALOG	Tagalog
THAI (LAOTIAN)	Thai (Laotian)
TURKISH	Turkish
UKRAINIAN	Ukrainian
VIETNAMESE	Vietnamese
YIDDISH	Yiddish
Other, specify	Other, Specify
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who speak a language other than English at home

Skip Instructions:

<1-53,55-57,RF,DK> [goto LANGMED_A]
 <54> [goto LANGSPECSP_A]

2025 National Health Interview Survey (NHIS) Questionnaire

LNG: Language Spoken at Home

Question ID: LNG.0040.00.4 Variable: LANGSPECSP_A Interview Module: Adult Content Type: Emerging Content

Question Text:

* Enter language spoken most often at home.

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who speak a language other than English at home with an unlisted language

Skip Instructions:

<verbatim,RF,DK> [goto LANGMED_A]

2025 National Health Interview Survey (NHIS) Questionnaire

LNG: Language Spoken at Home

Question ID: LNG.0050.00.4 Variable: LANGMED_A Interview Module: Adult Content Type: Emerging Content

Question Text:

When you watch television, read news online or in print, or listen to the radio, which language do you use most often?

Fills:

Response:

1	English
2	Other language
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who speak a language other than English at home

Skip Instructions:

<1,2,RF,DK> [goto LANGDOC_A]

2025 National Health Interview Survey (NHIS) Questionnaire

LNG: Language Spoken at Home

Question ID: LNG.0060.00.4 Variable: LANGDOC_A Interview Module: Adult Content Type: Emerging Content

Question Text:

When you see a doctor or other health care professional, which language do you use most often?

Fills:

Response:

1	English
2	Other language
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who speak a language other than English at home

Skip Instructions:

<1,2,RF,DK> if SOC.SOCSCCLPAR_A=1-3 [goto LANGSOC_A]
else [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

LNG: Language Spoken at Home

Question ID: LNG.0070.00.4 Variable: LANGSOC_A Interview Module: Adult Content Type: Emerging Content

Question Text:

When you participate in social activities, such as visiting friends, attending clubs and meetings, or going to parties, which language do you use most often?

Fills:

Response:

1	English
2	Other language
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who speak a language other than English at home and who did not answer unable to do, refused, or don't know when asked if they have difficulty participating in social activities such as visiting friends, attending clubs and meetings, or going to parties

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

SCH: Schooling

Question ID: SCH.0010.00.1 Variable: SCHCURENR_A Interview Module: Adult Content Type: Annual Core

Question Text:

Are you currently enrolled in or attending school?

* **Read if necessary:** *School includes high school, college, trade school, and professional school. Students may be enrolled part-time or full-time.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto SCHDYSMSS_A]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

SCH: Schooling

Question ID: SCH.0020.00.1 Variable: SCHDYSMSS_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, about how many days of school did you miss because you had an illness, injury, or disability?

Fills:

Response:

000-365	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adults 18+ who are currently enrolled in school

Skip Instructions:

<0-99,RF,DK> [goto next section]
<100-365> [goto ERR1_SCHDYSMSS_A]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_SCHDYSMSS_A	Missed 100-365 days	{signal ERR1_SCHDYSMSS_A} ^SCHDYSMSS_A is an unusually large number. Did you miss ^SCHDYSMSS_A days of school because of illness, injury, or disability? Please verify.

2025 National Health Interview Survey (NHIS) Questionnaire

EMP: Employment

Question ID: EMP.0010.00.1 Variable: EMPLASTWK_A Interview Module: Adult Content Type: Annual Core

Question Text:

LAST WEEK, did you work for pay at a job or business?

* If the respondent says ^heshetheywork, but not for pay, at a family-owned job or business, enter '1' for yes.

Fills:

heshetheywork	Description	he works/she works/they work
	Instruction	elseif GEN.SEX_FINAL=1 fill "he works" elseif GEN.SEX_FINAL=2 fill "she works" elseif GEN.SEX_FINAL IN (RF,DK) fill "they work"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto EMPHOURS_A]
<2> [goto EMPNOWRK_A]
<RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

EMP: Employment

Question ID: EMP.0020.00.1 Variable: EMPNOWRK_A Interview Module: Adult Content Type: Annual Core

Question Text:

Did you have a job or business LAST WEEK, but were temporarily absent due to illness, vacation, family or maternity leave, or some other reason?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were not working for pay at a job or business last week

Skip Instructions:

<1> [goto EMPHOURS_A]
<2> [goto EMPWHYNOT_A]
<RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

EMP: Employment

Question ID: EMP.0030.00.1 Variable: EMPWHYNOT_A Interview Module: Adult Content Type: Annual Core

Question Text:

What is the MAIN reason you were not working for pay at a job or business last week?

* Probe if necessary.

Fills:

Response:

01	Unemployed, laid off, looking for work
02	Seasonal/contract work
03	Retired
04	Unable to work for health reasons/disabled
05	Taking care of house or family
06	Going to school
07	Working at a family-owned job or business not for pay
08	Other
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ who were not working for pay and were not on temporary leave from a job or business last week

Skip Instructions:

<1-6,8,RF,DK> [goto EMPWHENWRK_A]

<7> [goto EMPHOURS_A]

2025 National Health Interview Survey (NHIS) Questionnaire

EMP: Employment

Question ID: EMP.0040.00.1 Variable: EMPWHENWRK_A Interview Module: Adult Content Type: Annual Core

Question Text:

When was the last time you worked for pay at a job or business, even if only for a few days?

Fills:

Response:

1	Within the past 12 months
2	1-5 years ago
3	Over 5 years ago
4	Never worked
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ whose main reason for not working last week was because they couldn't find work, did seasonal or contract work, were retired, unable to work for health reasons, taking care of the house/family, going to school, or some other reason, or refused or don't know

Skip Instructions:

```
<1> if EMPWHYNOT_A=2 [goto EMPHOURS_A]
else [goto EMPSICKLV_A]
<2-4,RF,DK> [goto next section]
```

2025 National Health Interview Survey (NHIS) Questionnaire

EMP: Employment

Question ID: EMP.0050.00.1 Variable: EMPHOURS_A Interview Module: Adult Content Type: Annual Core

Question Text:

^Whenwork many hours do you USUALLY work in total at ALL jobs or businesses?

Fills:

Whenwork	Description	When you are doing your seasonal or contract work, how/How
	Instruction	If EMPWHYNOT_A=2 fill "When you are doing your seasonal or contract work, how" else fill "How"

Response:

001-168	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adults 18+ who were working at or were on temporary leave from a paid job or business last week, or worked but not for pay at a family business or had seasonal/contract work in the past 12 months

Skip Instructions:

<1-94> [goto EMPSICKLV_A]
<95-168> [goto ERR1_EMPHOURS_A], then [goto EMPSICKLV_A]
<RF,DK> [goto EMPFULLTIM_A]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_EMPHOURS_A	Hours worked last week/usually work per week unusually high	{signal ERR1_EMPHOURS_A} ^EMPHOURS_A hours is unusually high. Please verify. Make corrections if necessary.

2025 National Health Interview Survey (NHIS) Questionnaire

EMP: Employment

Question ID: EMP.0060.00.1 Variable: EMPFULLTIM_A Interview Module: Adult Content Type: Annual Core

Question Text:

^WhenworkDo you USUALLY work 35 hours or more per week in total at ALL jobs or businesses?

Fills:

WhenworkDo	Description	When you are doing your seasonal or contract work, do/Do
	Instruction	If EMPWHYNOT_A=2 fill: "When you are doing your seasonal or contract work, do" else "Do"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who refused or didn't know how many hours they usually work

Skip Instructions:

<1,2,RF,DK> [goto EMPSICKLV_A]

2025 National Health Interview Survey (NHIS) Questionnaire

EMP: Employment

Question ID: EMP.0070.00.1 Variable: EMPSICKLV_A Interview Module: Adult Content Type: Annual Core

Question Text:

^LASTJOB paid sick leave available if you ^workneed it?

Fills:

LASTJOB	Description	When you last worked, was/Regarding your job or business, is
	Instruction	If EMPWHENWRK_A=1 and EMPWHYNOT_A ne 2 fill: "When you last worked, was" else fill: "Regarding your job or business, is"
workneed	Description	needed/need
	Instruction	If EMPWHENWRK_A=1 and EMPWHYNOT_A ne 2, fill: "needed"; else fill: "need"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were working at or were on temporary leave from a paid job or business last week; who work, but not for pay at family business or who are not currently working but who had some period of employment in the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto EMPHEALINS_A]

2025 National Health Interview Survey (NHIS) Questionnaire

EMP: Employment

Question ID: EMP.0080.00.1 Variable: EMPHEALINS_A Interview Module: Adult Content Type: Annual Core

Question Text:

^LASTJOB health insurance offered to you through your workplace?

Fills:

LASTJOB	Description	When you last worked, was/Regarding your job or business, is
	Instruction	If EMPWHENWRK_A=1 and EMPWHYNOT_A ne 2 fill: "When you last worked, was" else fill: "Regarding your job or business, is"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who were working at or were on temporary leave from a paid job or business last week; who work, but not for pay at family business or who are not currently working but who had some period of employment in the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto EMPDAYMISS_A]

2025 National Health Interview Survey (NHIS) Questionnaire

EMP: Employment

Question ID: EMP.0090.00.1 Variable: EMPDAYMISS_A Interview Module: Adult Content Type: Annual Core

Question Text:

During the past 12 months, about how many days of work did you miss because you had an illness, injury, or disability?

* **Read if necessary:** Do not include family or ^paternitymaternity Leave.

Fills:

paternitymaternity	Description	paternity/maternity/maternity or paternity
	Instruction	If GEN.SEX_FINAL=1 fill "paternity" else if GEN.SEX_FINAL=2 fill "maternity" else if GEN.SEX_FINAL=RF,DK fill "maternity or paternity"

Response:

000-365	Range of values
997	Refused
999	Don't Know

Universe:

Sample Adults 18+ who were working at or were on temporary leave from a paid job or business last week; who work, but not for pay at family business or who are not currently working but who had some period of employment in the past 12 months

Skip Instructions:

<0-99,RF,DK> [goto next section]
<100-365> [goto ERR1_EMPDAYMISS_A] then [goto next section]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_EMPDAYMISS_A	Days of work missed in the past 12 months unusually high	{signal ERR1_EMPDAYMISS_A} ^EMPDAYMISS_A days is unusually high. Please verify. Make corrections if necessary.

2025 National Health Interview Survey (NHIS) Questionnaire

CAR: Caregiving

Question ID: CAR.0010.00.3 Variable: REGCARE_A Interview Module: Adult Content Type: Sponsored Content

Question Text:

During the past 30 days, did you provide regular care or assistance to a friend or family member who has a health problem or disability?

* If caregiving recipient has died in the past 30 days, code 3 and say: I'm so sorry for your loss.

Fills:

Response:

1	Yes
2	No
3	Caregiving recipient died in past 30 days
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,3,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire
VOL: Volunteer Activities

Question ID: VOL.0010.00.4 Variable: CEVOLUN1_A Interview Module: Adult Content Type: Emerging Content

Question Text:

During the past 12 months, did you spend any time volunteering for any organization or association?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,RF> [goto next section]
<2,DK> [goto CEVOLUN2_A]

2025 National Health Interview Survey (NHIS) Questionnaire

VOL: Volunteer Activities

Question ID: VOL.0020.00.4 Variable: CEVOLUN2_A Interview Module: Adult Content Type: Emerging Content

Question Text:

Some people don't think of activities they do infrequently or for children's schools or youth organizations as volunteer activities. During the past 12 months, have you done any of these types of activities?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who did not spend time volunteering in the past 12 months or don't know

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

FEM: Employment of family members

Question ID: FEM.0010.00.1 Variable: FEMINTRO_A Interview Module: Adult Content Type: Annual Core

Question Text:

Now I'm going to ask you about some of the other members of your family.

* Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

If Sample Adult lives in a family with at least one other adult AND
(Sample Child and Sample Adult are not in the same family
OR Sample Child and Sample Adult are in the same family AND Sample Child FEM section has not
been completed
OR the Sample Adult and Sample Child are in the same family and every question asked in the
Sample Child FEM section was answered with RF/DK and the person answering the SC interview and
the SA are different people.

Skip Instructions:

<1>[goto tblFEM_A]

Replicate To:

FEMINTRO_C

2025 National Health Interview Survey (NHIS) Questionnaire

FEM: Employment of family members

Question ID: FEM.0030.00.1 Variable: FEMWORK_A Interview Module: Adult Content Type: Annual Core

Question Text:

Does ^ALIASNAME work for pay at a job or business?

* If the respondent says ^heshetheywork, but not for pay, at a family-owned job or business, enter '1' for yes.

Fills:

ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]
heshetheywork	Description	he works/she works/they work
	Instruction	elseif GEN.SEX_FINAL=1 fill "he works" elseif GEN.SEX_FINAL=2 fill "she works" elseif GEN.SEX_FINAL IN (RF,DK) fill "they work"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

If Sample Adult lives in a family with at least one other adult AND
(Sample Child and Sample Adult are not in the same family
OR Sample Child and Sample Adult are in the same family AND Sample Child FEM section has not
been completed
OR the Sample Adult and Sample Child are in the same family and every question asked in the
Sample Child FEM section was answered with RF/DK and the person answering the SC interview and
the SA are different people.

Skip Instructions:

<1> [goto FEMWKFT_A]
<2,RF,DK> if there is another adult in the family [goto FEMWORK_A] for the next adult 18+
else [goto next section]

Replicate To:

FEMWORK_C

2025 National Health Interview Survey (NHIS) Questionnaire

FEM: Employment of family members

Question ID: FEM.0040.00.1 Variable: FEMWKFT_A Interview Module: Adult Content Type: Annual Core

Question Text:

Does ^ALIASNAME usually work 35 hours or more per week in total at ^hishertheir job or jobs?

Fills:

ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]
hishertheir	Description	his/her/their
	Instruction	If GEN.SEX_FINAL=1 fill "his"; else if GEN.SEX_FINAL=2 fill "her"; else if GEN.SEX_FINAL IN (DK, RF) fill "their"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

If Sample Adult lives in a family with at least one other adult AND
(Sample Child and Sample Adult are not in the same family
OR Sample Child and Sample Adult are in the same family AND Sample Child FEM section has not
been completed
OR the Sample Adult and Sample Child are in the same family and every question asked in the
Sample Child FEM section was answered with RF/DK and the person answering the SC interview and
the SA are different people.

Skip Instructions:

<1,2,RF,DK> if another adult in the family [goto FEMWORK_A] for the next adult 18+
else [goto next section]

Replicate To:

FEMWKFT_C

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0010.00.1 Variable: INCINTRO_A Interview Module: Adult Content Type: Annual Core

Question Text:

The next questions are about your total ^FAMILY income in ^LASTYEAR BEFORE TAXES. ^INCSAFAM

* **Read if necessary:** *Income is important in analyzing the health information we collect. For example, with this information, we can learn whether persons in one income group use certain types of medical services more or less often than those in another group. Please be assured that, like all other information you have provided, these answers will remain confidential.*

* **Enter '1' to continue.**

Fills:

FAMILY	Description	family
	Instruction	If PCNT_A > 1 fill "family"
LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
INCSAFAM	Description	Based on questions asked earlier we have that your family consists of ^SAFAM.
	Instruction	If more than one person in the Sample Adult's family, fill "Based on questions asked earlier we have that your family consists of ^SAFAM." else no fill
SAFAM	Description	List of people in SA's family
	Instruction	For all people with FAMILYA_FLG =1 and are not Household Respondent, fill with their names. If Household Respondent (Roster.HHC.HHRESPAVAIL) is on list of names, fill "you" for name and place name at the beginning of the list. Include Sample Adult in this list.

Response:

1	Enter 1 to Continue

Universe:

Sample Adults 18+ and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed
OR the Sample Adult and Sample Child are not in the same family
OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

<1> [goto INCWRKO_A]

Replicate To:

INCINTRO_C

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0020.00.1 Variable: INCWRKO_A Interview Module: Adult Content Type: Annual Core

Question Text:

In ^LASTYEAR, did ^YOUFAM18YRS receive income from wages, salaries, commissions, bonuses, tips, or self-employment?

^INCSAFAMoptional

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
YOUFAM18YRS	Description	you/you or any family members 18 or older
	Instruction	If PCNT18UP_A=1 fill "you" else if PCNT18UP_A GT 1 fill "you or any family members 18 or older"
INCSAFAMoptional	Description	Read if necessary: For the purpose of this survey, your family includes ^FAMVERSA_fill
	Instruction	If more than one person in the Sample Adult's family, fill "* Read if necessary: For the purpose of this survey, your family includes ^FAMVERSA_fill." else no fill
FAMVERSA_fill	Description	List of all people in Sample Adult's family
	Instruction	Loop through all persons on roster and add to list of names if: -people related via REL (FAMA_REL_FLG = 1) or -people who are related to the SA (RELATE = 1-13) or -people in SC's family and the 1st person in HH in SC's family are related to the SA (RELATE = 1-13) Do not include Sample Adult on list. If Household Respondent (Roster.HHC.HHRESPAVAIL) is on list of names, fill "you" for name and place name at the beginning of the list. If only one person on the list of names and person ne Roster.HHC.HHRESPAVAIL, follow list with "is". If more than one person on the list or only one person on list and person is Household Respondent (Roster.HHC.HHRESPAVAIL), follow list with "are".

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed
OR the Sample Adult and Sample Child are not in the same family
OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

```
<1,2,RF,DK> [goto INCINTER_A]
```

Replicate To:

INCWRKO_C

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0030.00.1 Variable: INCINTER_A Interview Module: Adult Content Type: Annual Core

Question Text:

In ^LASTYEAR, did ^YOUFAMHERE receive income from interest-bearing accounts or investments, dividends from stocks or mutual funds, net rental income, royalty income, or income from estates and trusts?

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
YOUFAMHERE	Description	you/you or any family members
	Instruction	If PCNT_A=1 fill "you" else if PCNT_A GT 1 fill "you or any family members"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

<1,2,DK> [goto INCSSRR_A]
<RF> if INCWRKO_A IN (1,2,DK) [goto INCSSRR_A]
else [goto next section]

Replicate To:

INCINTER_C

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0040.00.1 Variable: INCSSRR_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** In ^LASTYEAR, did ^YOUFAMHERE receive...

Income from Social Security or Railroad Retirement?

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
YOUFAMHERE	Description	you/you or any family members
	Instruction	If PCNT_A=1 fill "you" else if PCNT_A GT 1 fill "you or any family members"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ and Sample Adult and Sample Child are in the same family and the INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent and the Sample Adult did not refuse both the income from wages and income from accounts questions

Skip Instructions:

<1,2,RF,DK> [goto INCSSISSDI_A]

Replicate To:

INCSSRR_C

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0050.00.1 Variable: INCSSISSDI_A Interview Module: Adult Content Type: Annual Core

Question Text:

***Read if necessary:** In ^LASTYEAR, did ^YOUFAMHERE receive...

Supplemental Security Income, SSI, or Social Security Disability Income, SSDI, which are different from Social Security?

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
YOUFAMHERE	Description	you/you or any family members
	Instruction	If PCNT_A=1 fill "you" else if PCNT_A GT 1 fill "you or any family members"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ and Sample Adult and Sample Child are in the same family and the INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent and the Sample Adult did not refuse both the income from wages and income from accounts questions

Skip Instructions:

<1> [goto SSISDIBTH_A]
<2,RF,DK> [goto INCWELF_A]

Replicate To:

INCSSISSDI_C

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0060.00.1 Variable: SSISDIBTH_A Interview Module: Adult Content Type: Annual Core

Question Text:

Was this Supplemental Security Income, SSI, Social Security Disability Income, SSDI, or both?

Fills:

Response:

1	SSI
2	SSDI
3	Both SSI and SSDI
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ where someone in the family gets SSI or SSDI and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

<1-3,RF,DK> [goto SSISDIDSB_A]

Replicate To:

SSISDIBTH_C

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0070.00.1 Variable: SSISSDIDSB_A Interview Module: Adult Content Type: Annual Core

Question Text:

Was this received as a disability benefit?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample adults 18+ where someone in the family gets SSI or SSDI and Sample Child and Sample Adult are in the same family and the INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

```
<1> if GEN.PCNT_A gt 1 [goto SSISSDIP_A]
elseif GEN.PCNT_A=1 [goto INCWELF_A]
<2,RF,DK> [goto INCWELF_A]
```

Replicate To:

SSISSDIDSB_C

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0090.00.1 Variable: SSISDIP_A Interview Module: Adult Content Type: Annual Core

Question Text:

In ^LASTYEAR, who received this disability benefit?

* **Read if necessary:** Do NOT include a benefit received on behalf of someone else.

* **Enter all that apply, separate with commas.**

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year

Response:

00	Not on roster
01-25	Person Number
97	Refused
99	Don't Know

Universe:

Sample Adults 18+ with more than one person in the family where someone in the family gets SSI or SSDI and SSI/SSDI was received as a disability benefit and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

<1-25,RF,DK> [goto INCWELF_A]

Replicate To:

SSISDIP_C

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0100.00.1 Variable: INCWELF_A Interview Module: Adult Content Type: Annual Core

Question Text:

In ^LASTYEAR, did ^YOUFAMHERE receive...

Any public assistance or welfare payments from the state or local welfare office?

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
YOUFAMHERE	Description	you/you or any family members
	Instruction	If PCNT_A=1 fill "you" else if PCNT_A GT 1 fill "you or any family members"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent and the Sample Adult did not refuse both the income from wages and income from accounts questions

Skip Instructions:

<1,2,RF,DK> [goto INCRETIRE_A]

Replicate To:

INCWELF_C

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0110.00.1 Variable: INCRETIRE_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** In ^LASTYEAR, did ^YOUFAMHERE receive...

Income from retirement, survivor, or disability pensions?

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
YOUFAMHERE	Description	you/you or any family members
	Instruction	If PCNT_A=1 fill "you" else if PCNT_A GT 1 fill "you or any family members"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent and the Sample Adult did not refuse both the income from wages and income from accounts questions

Skip Instructions:

<1,2,RF,DK> [goto INCOTHR_A]

Replicate To:

INCRETIRE_C

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0120.00.1 Variable: INCOTHR_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Read if necessary:** In ^LASTYEAR, did ^YOUFAMHERE receive...

Any other sources of income such as VA payments from the Veterans Benefits Administration, unemployment compensation, child support, or alimony?

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
YOUFAMHERE	Description	you/you or any family members
	Instruction	If PCNT_A=1 fill "you" else if PCNT_A GT 1 fill "you or any family members"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent and the Sample Adult did not refuse both the income from wages and income from accounts questions

Skip Instructions:

<1,2,RF,DK> [goto INCTOTAL_A]

Replicate To:

INCOTHR_C

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0130.00.1 Variable: INCTOTAL_A Interview Module: Adult Content Type: Annual Core

Question Text:

^INCALLFAM

What is your best estimate of ^TOTALINCOME from all sources, before taxes, in ^LASTYEAR?

* Enter '999995' if the reported income \$999,995 or greater.

Fills:

INCALLFAM	Description	INCTOTAL_A Introduction
	Instruction	IF PCNT_A GT 1 fill "When answering this next question, please remember to include your income PLUS the income of all family members living in this household."
TOTALINCOME	Description	your total income/the total income of all family members
	Instruction	If PCNT_A=1 fill "your total income" else if PCNT_A GT 1 fill "the total income of all family members"
LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year

Response:

000000-999995	Range of values
999997	Refused
999999	Don't Know

Universe:

Sample Adults 18+ and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent and the Sample Adult did not refuse both the income from wages and income from accounts questions

Skip Instructions:

<0-999> [goto ERR1_INCTOTAL_A]
 <250001-999995> [goto ERR2_INCTOTAL_A]
 <1000-250000> [goto next section]
 <RF,DK> [goto INC250PCT_A]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_INCTOTAL_A	Income low soft edit	{signal ERR1_INCTOTAL_A} Do not read to the respondent. ^INCTOTAL_A is unusually low. Make corrections if necessary.

ERR2_INCTOTAL_A	Income high soft edit	{signal ERR2_INCTOTAL_A} Do not read to the respondent. ^INCTOTAL_A is unusually high. Make corrections if necessary.

Replicate To:

INCTOTAL_C

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0150.01.1 Variable: INC250PCT_A Interview Module: Adult Content Type: Annual Core

Question Text:

Was your total ^FAMILY income from all sources less than ^250POVERTY_A or ^250POVERTY_A or more?

Fills:

FAMILY	Description	family
	Instruction	If PCNT_A > 1 fill "family"
250POVERTY_A	Description	250% of poverty threshold
	Instruction	Fill value stored in Adult.INC.INC250FILL_A

Response:

1	Less than ^250POVERTY_A
2	^250POVERTY_A or more
7	Refused
9	Don't Know

Universe:

Sample Adult 18+ who don't know or refuse the total family income and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

```
<1> [goto INC138PCT_A]
<2> if ((GEN.PCNT_A=1 and GEN.AGE_FINAL gt 65) or (GEN.PCNT_A=2 and GEN.AGE_FINAL of both
persons is le 65)) [goto INC75K_A]
elseif ((GEN.PCNT_A=1 and GEN.AGE_FINAL le 65) or (GEN.PCNT_A=2 and GEN.AGE_FINAL of at least 1
person gt 65) or GEN.PCNT_A=4) [goto INC100K_A]
elseif (GEN.PCNT_A=3 or GEN.PCNT_A ge 5) [goto INC400PCT_A]
<RF,DK> [goto next section]
```

Replicate To:

INC250PCT_C

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0160.01.1 Variable: INC138PCT_A Interview Module: Adult Content Type: Annual Core

Question Text:

Was your total ^FAMILY income from all sources less than ^138POVERTY_A or ^138POVERTY_A or more?

Fills:

FAMILY	Description	family
	Instruction	If PCNT_A > 1 fill "family"
138POVERTY_A	Description	138% of poverty threshold
	Instruction	Fill value stored in Adult.INC.INC138FILL_A

Response:

1	Less than ^138POVERTY_A
2	^138POVERTY_A or more
7	Refused
9	Don't Know

Universe:

Sample Adult 18+ answered less than 250% of poverty threshold and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

<1> [goto INC100PCT_A]
<2> [goto INC200PCT_A]
<RF,DK> [goto next section]

Replicate To:

INC138PCT_C

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0170.01.1 Variable: INC100PCT_A Interview Module: Adult Content Type: Annual Core

Question Text:

Was your total ^FAMILY income from all sources less than ^100POVERTY_A or ^100POVERTY_A or more?

Fills:

FAMILY	Description	family
	Instruction	If PCNT_A > 1 fill "family"
100POVERTY_A	Description	100% of poverty threshold
	Instruction	Fill value stored in Adult.INC.INC100FILL_A

Response:

1	Less than ^100POVERTY_A
2	^100POVERTY_A or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who answered less than 138% of poverty threshold and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

<1,2,RF,DK> [goto next section]

Replicate To:

INC100PCT_C

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0180.01.1 Variable: INC200PCT_A Interview Module: Adult Content Type: Annual Core

Question Text:

Was your total ^FAMILY income from all sources less than ^200POVERTY_A or ^200POVERTY_A or more?

Fills:

FAMILY	Description	family
	Instruction	If PCNT_A > 1 fill "family"
200POVERTY_A	Description	200% of poverty threshold
	Instruction	Fill value stored in Adult.INC.INC200FILL_A

Response:

1	Less than ^200POVERTY_A
2	^200POVERTY_A or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who answered 138% of poverty or more and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

<1> if GEN.PCNT_A=8 [goto INC100K_A]
else [goto next section]
<2,RF,DK> [goto next section]

Replicate To:

INC200PCT_C

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0190.00.1 Variable: INC75K_A Interview Module: Adult Content Type: Annual Core

Question Text:

Was your total ^FAMILY income from all sources less than \$75,000 or \$75,000 or more?

Fills:

FAMILY	Description	family
	Instruction	If PCNT_A > 1 fill "family"

Response:

1	Less than \$75,000
2	\$75,000 or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who answered 250% of poverty threshold or more and are from a 1-person family and are older than 65 or from a 2-person family and all are 65 or younger and

Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

```
<1> if GEN.PCNT_A=1 and GEN.AGE_FINAL gt 65 [goto INC400PCT_A]
elseif GEN.PCNT_A=2 and all persons GEN.AGE_FINAL le 65 [goto next section]
<2> [goto INC100K_A]
<RF,DK> [goto next section]
```

Replicate To:

INC75K_C

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0200.00.1 Variable: INC100K_A Interview Module: Adult Content Type: Annual Core

Question Text:

Was your total ^FAMILY income from all sources less than \$100,000 or \$100,000 or more?

Fills:

FAMILY	Description	family
	Instruction	If PCNT_A > 1 fill "family"

Response:

1	Less than \$100,000
2	\$100,000 or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who answered \$75,000 or more
or
answered 250% of poverty threshold or more and are from a 1-person family and are 65 or younger
or from a 2-person family and at least 1 person is older than 65 or from a 4-person family
or
answered less than 200% of poverty threshold and are from an 8-person family
and
Sample Adult and Sample Child are in the same family and the Sample Child INC section has not
been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult
and Sample Child are in the same family, Sample Child respondent answered all questions asked in
the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

```
<1> if GEN.PCNT_A IN (1,2) [goto INC400PCT_A]  
else [goto next section]  
<2> if GEN.PCNT_A IN (1,2) [goto INC150K_A]  
elseif GEN.PCNT_A=4 [goto INC400PCT_A]  
elseif GEN.PCNT_A=8 [goto next section]  
<RF,DK> [goto next section]
```

Replicate To:

INC100K_C

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0210.01.1 Variable: INC400PCT_A Interview Module: Adult Content Type: Annual Core

Question Text:

Was your total ^FAMILY income from all sources less than ^400POVERTY_A or ^400POVERTY_A or more?

Fills:

FAMILY	Description	family
	Instruction	If PCNT_A > 1 fill "family"
400POVERTY_A	Description	400% of poverty threshold
	Instruction	Fill value stored in Adult.INC.INC400FILL_A

Response:

1	Less than ^400POVERTY_A
2	^400POVERTY_A or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ who answered less than \$75,000 and are older than 65
or
answered less than \$100,000 and are from a 1-person family and is 65 or less or from a 2-person family or
answered \$100,000 or more and are from a 4-person family
or
answered 250% of poverty threshold or more and are from a 3 or 5+ person family
and
Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

<1> if GEN.PCNT_A IN (6,7) [goto INC150K_A]
else [goto next section]
<2> if GEN.PCNT_A IN (3,4) [goto INC150K_A]
else [goto next section]
<RF,DK> [goto next section]

Replicate To:

INC400PCT_C

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0220.00.1 Variable: INC150K_A Interview Module: Adult Content Type: Annual Core

Question Text:

Was your total ^FAMILY income from all sources less than \$150,000 or \$150,000 or more?

Fills:

FAMILY	Description	family
	Instruction	If PCNT_A > 1 fill "family"

Response:

1	Less than \$150,000
2	\$150,000 or more
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ answered \$100,000 or more and is from 1- or 2- person family OR respondent answered 400% of poverty or more and is from 3- or 4- person family OR respondent answered less than 400% of poverty and is from a family of 6- or 7- person family and Sample Adult and Sample Child are in the same family and the Sample Child INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family, Sample Child respondent answered all questions asked in the INC section with dk/rf and Sample Adult is not the Sample Child respondent

Skip Instructions:

<1,2,RF,DK> [goto next section]

Replicate To:

INC150K_C

2025 National Health Interview Survey (NHIS) Questionnaire

F00: Food Related Programs

Question ID: F00.0010.00.1 Variable: FSNAP12M_A Interview Module: Adult Content Type: Annual Core

Question Text:

At any time in the last 12 months did ^YOUFAMLVHERE_A receive ^FSSNAPNM?

* **Read if necessary:** *This program puts money on a SNAP EBT card that you can only use to buy food.*

Fills:

YOUFAMLVHERE_A	Description	you/any family members living here/you or any family members living at ^HNO ^HNOSUF ^STRNAME
	Instruction	If GEN.PCNT_A=1, fill: "you"; elseif GEN.PCNT_A gt 1 and Roster.HHC.tblNAME.bPerson [PX_A].ONOFFCAMPUS ne 1, fill: "any family members living here" elseif GEN.PCNT_A gt 1 and Roster.HHC.tblNAME.bPerson [PX_A].ONOFFCAMPUS=1, fill "you or any family members living at ^HNO ^HNOSUF ^STRNAME"
HNO	Description	{Value of HNO}
	Instruction	Fill GEN.HNO
HNOSUF	Description	{Value of HNOSUF}
	Instruction	Fill GEN.HNOSUF
STRNAME	Description	{Value of STRNAME}
	Instruction	Fill GEN.STRNAME
FSSNAPNM	Description	food stamp benefits/[state food stamp program name]

	Instruction	If AL then fill "Food Assistance Program or food stamp benefits" If AK then fill "SNAP or food stamp benefits" If AZ then fill "Nutrition Assistance or food stamp benefits" If AR then fill "SNAP or food stamp benefits" If CA then fill "CalFresh or food stamp benefits" If CO then fill "SNAP or food stamp benefits" If CT then fill "SNAP or food stamp benefits" If DE then fill "Food Supplement Program or food stamp benefits" If DC then fill "SNAP or food stamp benefits" If FL then fill "Food Assistance Program or food stamp benefits" If GA then fill "Georgia Food Stamp Program or food stamp benefits" If HI then fill "SNAP or food stamp benefits" If ID then fill "SNAP or food stamp benefits" If IL then fill "SNAP or food stamp benefits" If IN then fill "SNAP or food stamp benefits" If IA then fill "SNAP or food stamp benefits" If KS then fill "Food Assistance Program or food stamp benefits" If KY then fill "SNAP or food stamp benefits" If LA then fill "SNAP or food stamp benefits" If ME then fill "SNAP or food stamp benefits" If MD then fill "SNAP or food stamp benefits" If MA then fill "SNAP or food stamp benefits" If MI then fill "Food Assistance Program (FSP) or food stamp benefits" If MN then fill "SNAP or food stamp benefits" If MS then fill "SNAP or food stamp benefits" If MO then fill "SNAP or food stamp benefits" If MT then fill "SNAP or food stamp benefits" If NE then fill "SNAP or food stamp benefits" If NV then fill "SNAP or food stamp benefits" If NH then fill "SNAP or food stamp benefits" If NJ then fill "SNAP or food stamp benefits" If NM then fill "SNAP or food stamp benefits" If NY then fill "SNAP or food stamp benefits" If NC then fill "Food and Nutrition Services or food stamp benefits" If ND then fill "SNAP or food stamp benefits" If OH then fill "Food Assistance Program or food stamp benefits" If OK then fill "SNAP or food stamp benefits" If OR then fill "SNAP or food stamp benefits" If PA then fill "SNAP or food stamp benefits" If RI then fill "SNAP or food stamp benefits" If SC then fill "SNAP or food stamp benefits" If SD then fill "SNAP or food stamp benefits" If TN then fill "SNAP or food stamp benefits" If TX then fill "SNAP or food stamp benefits" If UT then fill "SNAP or food stamp benefits" If VT then fill "3SquaresVT or food stamp benefits" If VA then fill "SNAP or food stamp benefits" If WA then fill "Basic Food or food stamp benefits" If WV then fill "SNAP or food stamp benefits" If WI then fill "FoodShare or food stamp benefits" If WY then fill "SNAP or food stamp benefits"

Response :

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ where the Sample Adult and Sample Child are in the same family and the Sample Child F00 section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family and all questions in the Sample Child F00 section was answered with refused or don't know and the Sample Adult is not the Sample Child respondent

Skip Instructions:

<1,2,RF,DK> if PCNTF1255_A ge 1 or PCNTC05_A ge 1 [goto FWIC12M_A]
else if PCNTC517_A ge 1 [goto FLUNCH12M1_A]
else [goto FINISH_F00_A]

Replicate To:

FSNAP12M_C

2025 National Health Interview Survey (NHIS) Questionnaire

FOO: Food Related Programs

Question ID: F00.0030.00.1 Variable: FWIC12M_A Interview Module: Adult Content Type: Annual Core

Question Text:

At any time in the last 12 months did ^YOUFAMLVHERE_A receive benefits from the WIC program, that is, the Women, Infants, and Children program?

Fills:

YOUFAMLVHERE_A	Description	you/any family members living here/you or any family members living at ^HNO ^HNOSUF ^STRNAME
	Instruction	If GEN.PCNT_A=1, fill: "you"; elseif GEN.PCNT_A gt 1 and Roster.HHC.tblNAME.bPerson [PX_A].ONOFFCAMPUS ne 1, fill: "any family members living here" elseif GEN.PCNT_A gt 1 and Roster.HHC.tblNAME.bPerson [PX_A].ONOFFCAMPUS=1, fill "you or any family members living at ^HNO ^HNOSUF ^STRNAME"
HNO	Description	{Value of HNO}
	Instruction	Fill GEN.HNO
HNOSUF	Description	{Value of HNOSUF}
	Instruction	Fill GEN.HNOSUF
STRNAME	Description	{Value of STRNAME}
	Instruction	Fill GEN.STRNAME

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ living in families with females 12-55 years of age or children 0-5 years of age AND the Sample Adult and Sample Child are in the same family and the Sample Child F00 section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family and all questions in the Sample Child F00 section was answered with refused or don't know and the Sample Adult is not the sample child respondent OR the Sample Adult and Sample Child are in the same family and at least one question asked in Sample Child F00 section has a valid answer (not dk/rf) and the received WIC benefits question was not asked in the Sample Child F00 section

Skip Instructions:

<1,2,RF,DK> if PCNTC517_A ge 1 [goto FLUNCH12M1_A]
else [goto FINISH_F00_A]

Replicate To:

FWIC12M_C

2025 National Health Interview Survey (NHIS) Questionnaire

F00: Food Related Programs

Question ID: F00.0040.00.1 Variable: FLUNCH12M1_A Interview Module: Adult Content Type: Annual Core

Question Text:

At any time in the last 12 months, did ^SCCHILDFAM_A receive free or reduced-price breakfasts or lunches at school?

** **Read if necessary:** The National School Lunch Program and the School Breakfast Program provide cash assistance to states to operate breakfast and lunch programs in schools and residential childcare institutions. The programs provide low-price or free breakfasts and lunches to low-income children in kindergarten through 12th grade.*

Fills:

SCCHILDFAM_A	Description	^ALIASNAME/any child in your family
	Instruction	if PCNT517_A=1, fill: ^ALIASNAME of child in Sample Adult family, elseif PCNT517_A gt 1, fill "any child in your family",
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ living in families with children between the ages of 5-17 and the Sample Adult and Sample Child are in the same family and the Sample Child F00 section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and Sample Child are in the same family and all questions in the Sample Child F00 section was answered with refused or don't know and the sample adult is not the sample child respondent

Skip Instructions:

<1,2,RF,DK> [goto FINISH_F00_A]

Replicate To:

FLUNCH12M1_C

2025 National Health Interview Survey (NHIS) Questionnaire

FOO: Food Related Programs

Question ID: F00.0050.00.1 Variable: FINISH_FOO_A Interview Module: Adult Content Type: Annual Core

Question Text:

- * The Sample Adult food related programs section is now complete.
- * Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Adults 18+ where the Sample Adult F00 section has not been completed AND the Sample Adult and Sample Child are in the same family and the Sample Child F00 section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family and all questions in the Sample Child F00 section was answered with refused or don't know and the sample adult is not the sample child respondent the OR Sample Adult and Sample Child are in the same family and at least one question asked in Sample Child F00 section has a valid answer (not dk/rf) and the received WIC benefits question was not asked in the Sample Child F00 section and within the family exist at least one female 12-55 years of age or child 0-5 years of age

Skip Instructions:

<1> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

HOU: Housing

Question ID: HOU.0010.00.1 Variable: HOUYRSLIV_A Interview Module: Adult Content Type: Annual Core

Question Text:

About how long ^YRSLIV?

Fills:

YRSLIV	Description	have you lived at ^HNO ^HNOSUF ^STRNAME/have you lived in this house/apartment
	Instruction	If Roster.HHC.tblname.bPerson[PX_A]ONOFFCAMPUS=1 fill "have you lived at ^HNO ^HNOSUF ^STRNAME" else fill "have you lived in this house/apartment"
HNO	Description	{Value of HNO}
	Instruction	Fill GEN.HNO
HNOSUF	Description	{Value of HNOSUF}
	Instruction	Fill GEN.HNOSUF
STRNAME	Description	{Value of STRNAME}
	Instruction	Fill GEN.STRNAME

Response:

1	Less than 1 year
2	1 to 3 years
3	4 to 10 years
4	11 to 20 years
5	More than 20 years
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1-5,RF,DK> if ((GEN.SAMEFAM_FLG=1 and GEN.HOU_FLG_C=empty) or (GEN.SAMEFAM_FLG ne 1) or (GEN.SAMEFAM_FLG=1 and GEN.HOU_FLG_C=2 and GEN.SARESPSC_FLG ne 1))[goto HOUTENURE_A]
else [goto next section]

If GEN.AGE_FINAL[PX_A] lt 21 and HOUYRSLIV_A=5 [goto ERR1_HOUYRSLIV_A]

Hard Edit:

Check Text	Check Description	Check Text
ERR1_HOUYRSLIV_A	Hard check when years lived in home exceeds age	{check ERR1_HOUYRSLIV_A} Years in house/apartment exceed ^SANAME's age. Please correct.

2025 National Health Interview Survey (NHIS) Questionnaire

HOU: Housing

Question ID: HOU.0020.00.1 Variable: HOUTENURE_A Interview Module: Adult Content Type: Annual Core

Question Text:

^HOUTEN owned or rented by you ^SOMEFAM_A?

* If house has a mortgage, record as owned.

Fills:

HOUTEN	Description	Is this house/apartment at ^HNO ^HNOSUF ^STRNAME/Is this house/apartment
	Instruction	If Roster.HHC.tblName.bPerson[PX_A].ONOFFCAMPUS=1, fill "Is the house/apartment at ^HNO ^HNOSUF ^STRNAME" else fill "Is this house/apartment"
HNO	Description	{Value of HNO}
	Instruction	Fill GEN.HNO
HNOSUF	Description	{Value of HNOSUF}
	Instruction	Fill GEN.HNOSUF
STRNAME	Description	{Value of STRNAME}
	Instruction	Fill GEN.STRNAME
SOMEFAM_A	Description	or someone in your family
	Instruction	If PCNT18UP_A=1 fill: blank If PCNT18UP_A gt 1 fill: "or someone in your family"

Response:

1	Owned or being bought
2	Rented
3	Other arrangement
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ and Sample Adult and Sample Child are in the same family and the HOU section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family and Sample child respondent answered refused or don't know to all questions in the sample child HOU section and the sample child respondent is not the sample adult respondent.

Skip Instructions:

<1,3,RF,DK> [goto next section]
<2> [goto HOUVASST_A]

Replicate To:

HOUTENURE_C

2025 National Health Interview Survey (NHIS) Questionnaire

HOU: Housing

Question ID: HOU.0030.00.1 Variable: HOUGVASST_A Interview Module: Adult Content Type: Annual Core

Question Text:

^HOUGVT paying lower rent because the Federal, State, or local government is paying part of the cost?

** Read if necessary: Federal, State, or Local government housing programs for persons with low income may take many forms. Government housing assistance could come from monetary assistance to help pay rent, a program called "Section 8," direct payments to landlords, vouchers, or other types of assistance from a local housing authority. Living in public housing is considered housing assistance from the government.*

Fills:

HOUGVT	Description	Are you/Are you or anyone in your family/Is your family at ^HNO ^HNOSUF ^STRNAME
	Instruction	If Roster.HHC.tblName.bPerson[PX_A].ONOFFCAMPUS ne 1 and GEN.PCNT18UP_A=1, fill "Are you" elseif Roster.HHC.tblName.bPerson[PX_A].ONOFFCAMPUS ne 1 and PCNT18UP_A gt 1, fill "Are you or anyone in your family" elseif Roster.HHC.tblNAME.bPerson[PX_A].ONOFFCAMPUS=1, fill "Is your family at ^HNO ^HNOSUF ^STRNAME"
HNO	Description	{Value of HNO}
	Instruction	Fill GEN.HNO
HNOSUF	Description	{Value of HNOSUF}
	Instruction	Fill GEN.HNOSUF
STRNAME	Description	{Value of STRNAME}
	Instruction	Fill GEN.STRNAME

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with a house/apartment that is being rented AND Sample Adult and Sample Child are in the same family and the house/apartment is being owned/rented and the HOU section has not been completed OR the Sample Adult and Sample Child are not in the same family section

Skip Instructions:

<1,2,RF,DK> [goto next section]

Replicate To:

HOUGVASST_C

2025 National Health Interview Survey (NHIS) Questionnaire

CIV: Civic Engagement

Question ID: CIV.0010.00.4 Variable: CEMMETNG_A Interview Module: Adult Content Type: Emerging Content

Question Text:

During the past 12 months, did you attend a public meeting, such as a zoning or school board meeting, that discussed a local issue?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto CEVOTELC_A]

2025 National Health Interview Survey (NHIS) Questionnaire

CIV: Civic Engagement

Question ID: CIV.0020.00.4 Variable: CEVOTELC_A Interview Module: Adult Content Type: Emerging Content

Question Text:

Did you vote in the LAST LOCAL elections, such as for mayor, councilmembers, or school board?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

REC: Person's name

Question ID: REC.0010.00.1 Variable: LNKFNAME_A Interview Module: Adult Content Type: Annual Core

Question Text:

* **Ask or verify:** What is your full name?

* **Enter first name.**

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<allow 20,RF,DK> [goto LNKMNAME_A]

2025 National Health Interview Survey (NHIS) Questionnaire

REC: Person's name

Question ID: REC.0020.00.1 Variable: LNKNAME_A Interview Module: Adult Content Type: Annual Core

Question Text:

- * Enter middle name.
- * Press "Enter" to skip to last name if respondent has no middle name.

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<allow 20,RF,DK> [goto LNKNAME_A]

2025 National Health Interview Survey (NHIS) Questionnaire

REC: Person's name

Question ID: REC.0030.00.1 Variable: LNKLNNAME_A Interview Module: Adult Content Type: Annual Core

Question Text:

* Enter last name.

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<allow 20,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

TEL: Telephone Use

Question ID: TEL.0010.00.1 Variable: TELCURWRK_A Interview Module: Adult Content Type: Annual Core

Question Text:

Is there at least one telephone INSIDE ^HOME that is currently working and is not a cell phone?

Fills:

HOME	Description	your home at ^HNO ^HNOSUF ^STRNAME/your home
	Instruction	If Roster.HHC.tblNAME.bPerson[PX_A].ONOFFCAMPUS=1, fill "your home at ^HNO ^HNOSUF ^STRNAME" else fill "your home"
HNO	Description	{Value of HNO}
	Instruction	Fill GEN.HNO
HNOSUF	Description	{Value of HNOSUF}
	Instruction	Fill GEN.HNOSUF
STRNAME	Description	{Value of STRNAME}
	Instruction	Fill GEN.STRNAME

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ where the Sample Adult and Sample Child are in the same family but TELCURWRK_C has not been asked OR Sample Adult and Sample Child are in the same family, TELCURWRK_C was answered don't know or refused and the Sample Adult is not the Sample Child Respondent or where the Sample Adult does not live in same family as Sample Child

Skip Instructions:

<1,2,RF,DK> [goto TELCEL_A]

Replicate To:

TELCURWRK_C

2025 National Health Interview Survey (NHIS) Questionnaire

TEL: Telephone Use

Question ID: TEL.0020.00.1 Variable: TELCEL_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you have a working cell phone?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+

Skip Instructions:

<1> if TELCURWRK_A=1 or (TELCURWRK_C=1 and GEN.SAMEFAM_FLG=1)[goto PHONEUSE_A]
else[goto TLNO_TEL_SA]

<2,RF,DK> if (GEN.SAMEFAM_FLG=1 and PHONELIVE_C=empty) or (GEN.SAMEFAM_FLG=1 and PHONELIVE_C IN (RF,DK) and GEN.SARESPSC_A ne 1) or (GEN.SAMEFAM_FLG ne 1)) and GEN.PCNT_A gt 1 [goto PHONELIVE_A]
else [goto TLNO_TEL_SA]

2025 National Health Interview Survey (NHIS) Questionnaire

TEL: Telephone Use

Question ID: TEL.0030.00.1 Variable: PHONELIVE_A Interview Module: Adult Content Type: Annual Core

Question Text:

Do you live with anyone ^ATHOME who has a working cell phone?

Fills:

ATHOME	Description	at your home at {Value of HNO} {Value of HNOSUF} {Value of STRNAME}
	Instruction	If Roster.HHC.tblNAME.bPerson[PX_A].ONOFFCAMPUS=1, fill "at your home at ^HNO ^HNOSUF ^STRNAME" else leave blank
HNO	Description	{Value of HNO}
	Instruction	Fill GEN.HNO
HNOSUF	Description	{Value of HNOSUF}
	Instruction	Fill GEN.HNOSUF
STRNAME	Description	{Value of STRNAME}
	Instruction	Fill GEN.STRNAME

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ in a family with at least one other person without working cell phones where Sample Adult does not live in same family as Sample Child or Sample Adult and Sample Child are in the same family but PHONELIVE_C has not been asked OR Sample Adult and Sample Child are in the same family, PHONELIVE_C was answered dk/rf and the Sample Adult is not the Sample Child Respondent.

Skip Instructions:

<1,2,RF,DK> [goto TLNO_TEL_SA]

Replicate To:

PHONELIVE_C

2025 National Health Interview Survey (NHIS) Questionnaire

TEL: Telephone Use

Question ID: TEL.0040.00.1 Variable: PHONEUSE_A Interview Module: Adult Content Type: Annual Core

Question Text:

Of all the telephone calls that you answer, are all or almost all on your cell phones, some on your cell phone and some on your home phone, or very few or none on your cell phones?

Fills:

Response:

1	All or almost all calls on cell phone
2	Some on cell phone and some on home phone
3	Very few or none on cell phone
7	Refused
9	Don't Know

Universe:

Sample Adults 18+ with working personal cell phone and who said they have a working land-line in household or in the same family as sample child respondent who said they have a working landline in the household.

Skip Instructions:

<1-3,RF,DK> [goto TLNO_TEL_SA]

2025 National Health Interview Survey (NHIS) Questionnaire

LNK: Linkage

Question ID: LNK.0010.00.1 Variable: LNKINTRO_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

We would like the last four digits of your Social Security Number^medicarenum. This information will help us link your survey data with health-related records of other government agencies, and allow us to conduct additional research without taking up your time with more questions. The National Center for Health Statistics (NCHS) uses this information for research purposes only. Providing this information is voluntary. There will be no effect on your benefits if you do not provide this information. Federal laws authorize us to ask for this information. Like all other answers you have provided, this information will remain confidential.

*** Read if necessary:** The specific federal laws protecting your privacy and the confidentiality of your data are the Public Health Service Act (Title 42, U.S.C., Section 242m(d)); the Confidential Information Protection and Statistical Efficiency Act or CIPSEA (44 U.S.C. 3561-3583); and the Privacy Act of 1974 (5 U.S.C. § 552a). In addition to the above cited laws, NCHS complies with the Federal Cybersecurity Enhancement Act of 2015 (6 U.S.C. §§ 151 and 151 note) which protects Federal information systems from cybersecurity risks by screening their networks.

*** Read if necessary:** NCHS collects health-related data from other government agencies, including records from Medicare and Medicaid Services, Social Security, housing, and death certificates. If you agree, NCHS will attempt to link records such as these with your survey data to give a fuller picture of the kinds of things that affect health. NCHS does this linkage. Your name and your information are not given to these agencies.

*** Read if necessary: If asked:**

Fills:

medicarenum	Description	, and the last four characters of your Medicare number
	Instruction	If INS.HIKIND_A=2 or INS.MCAREPRB_A=1, fill ", and the last four characters of your Medicare number" else, fill nothing

Response:

1	Enter 1 to Continue

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto SSN4_A]

2025 National Health Interview Survey (NHIS) Questionnaire

LNK: Linkage

Question ID: LNK.0020.00.1 Variable: SSN4_A Interview Module: Adult Content Type: Annual Core

Question Text:

[F1]

What are the last four digits of your Social Security Number?

* **Read if necessary:** *Providing this information is voluntary. There will be no effect on your benefits if you do not provide this information. Federal laws authorize us to ask for this information. Like all other information you have provided, these answers will remain confidential.*

* **Read if asked about specific laws:** *The specific federal laws protecting your privacy and the confidentiality of your data are the Public Health Service Act, which is Title 42, U.S.C., Section 242m(d); the Confidential Information Protection and Statistical Efficiency Act or CIPSEA (44 U.S.C. 3561-3583); and the Privacy Act of 1974, which is 5 U.S.C. § 552a. In addition to the above cited laws, NCHS complies with the Federal Cybersecurity Enhancement Act of 2015 (6 U.S.C. §§ 151 and 151 note) which protects Federal information systems from cybersecurity risks by screening their networks.*

* **Enter 'N' for no Social Security Number.**

Fills:

Response:

0001-9999	Range of values
N	No Social Security Number
99997	Refused
99999	Don't Know

Universe:

Skip Instructions:

```
if SSN4_A=000-999 [goto ERR2_SSN4_A]
elseif SSN4_A NOT IN (N,RF,DK,000-999,0001-9999) [goto ERR3_SSN4_A]
<0001-9999> if Adult.INS.HIKIND_A=2 or Adult.INS.MCAREPRB_A=1 [goto LAST4C_A]
else [goto next section]
<N,RF,DK> if Adult.INS.HIKIND_A=2 or Adult.INS.MCAREPRB_A=1 [goto LAST4C_A]

else [goto RLINK_A]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR3_SSN4_A	SSN last four digits are 0000 or a letter other than N hard edit	{check ERR3_SSN4_A} The last 4 digits of a SSN should be between 0001-9999. For a respondent who does not want to provide the SSN, enter 'Ctrl D' or 'Ctrl R' for 'Don't Know' or 'Refused.' If a respondent does not have a SSN, enter 'N'. Please correct.

ERR2_SSN4_A	Entered less than four digits hard edit	{check ERR2_SSN4_A} You must enter all four of the last four digits of the Social Security Number. Please correct.

2025 National Health Interview Survey (NHIS) Questionnaire

LNK: Linkage

Question ID: LNK.0040.00.1 Variable: LAST4C_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

What are the last four characters of your Medicare or Health Insurance Claim Number?

*** Read if necessary:** *Providing this information is voluntary. There will be no effect on your benefits if you do not provide this information. Federal laws authorize us to ask for this information. Like all other information you have provided, these answers will remain confidential.*

*** Read if asked about specific laws:** *The specific federal laws protecting your privacy and the confidentiality of your data are the Public Health Service Act, which is Title 42, U.S.C., Section 242m(d); the Confidential Information Protection and Statistical Efficiency Act or CIPSEA (44 U.S.C. 3561-3583); and the Privacy Act of 1974, which is 5 U.S.C. § 552a. In addition to the above cited laws, NCHS complies with the Federal Cybersecurity Enhancement Act of 2015 (6 U.S.C. §§ 151 and 151 note) which protects Federal information systems from cybersecurity risks by screening their networks.*

*** Reports from memory are acceptable if the Medicare card (or some other form of documentation) is not available.**

*** Enter the last four characters, which should be letter-letter-number-number.**

Fills:

Response:

Verbatim	Verbatim values
9997	Refused
9999	Don't Know

Universe:

Sample adults 18+ who have Medicare

Skip Instructions:

if anything lt 4 alphanumeric characters [goto ERR1_LAST4C_A]
elseif SSN4_A IN (N,RF,DK) or LAST4C_A IN (RF,DK) [goto RLINK_A]
else [goto next section]

Hard Edit:

Check Text	Check Description	Check Text
ERR1_LAST4C_A	Medicare number less than 4 characters	{check ERR1_LAST4C_A} You must enter all four of the last four alphanumeric characters of the Medicare number. Please correct.

2025 National Health Interview Survey (NHIS) Questionnaire

LNK: Linkage

Question ID: LNK.0060.00.1 Variable: RLINK_A Interview Module: Adult Content Type: Annual Core

Question Text:

?[F1]

May we try to link your survey data without a ^SSNMEDNUM?

*** Read if necessary:** Any data obtained are protected by strict federal laws, including the Public Health Service Act, which is Title 42, U.S.C., Section 242m(d); the Confidential Information Protection and Statistical Efficiency Act (44 U.S.C. §§ 3561-3583); and the Privacy Act of 1974, which is 5 U.S.C. § 552a. In addition to the above cited laws, NCHS complies with the Federal Cybersecurity Enhancement Act of 2015 (6 U.S.C. §§ 151 and 151 note) which protects Federal information systems from cybersecurity risks by screening their networks.

Fills:

SSNMEDNUM	Description	consent by SSN or Medicare number
	Instruction	if (SSN4_A IN (N,RF,DK) and ((Adult.INS.HIKIND_A ne 2 and Adult.INS.MCAREPRB_A ne 1) or (MCN04_A ge 001 and MCN04_A le 9999) or (LAST4C_A NOT IN (empty,RF, DK)))) fill= "social security number" elseif ((SSN4_A ge 0001 and SSN4_A le 9999) and (Adult.INS.HIKIND_A = 2 or Adult.INS.MCAREPRB_A =1) and (MCN04_A IN (RF, DK) or (LAST4C_A IN (RF,DK)))) fill = "Medicare or Health Insurance Claim Number" else fill = "social security number, Medicare or Health Insurance Claim Number"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample adults 18+ who answered no SSN or refused or don't know last 4 digits of SSN or who answered refused or don't know at last 4 of Medicare number

Skip Instructions:

<1,2,RF,DK>[goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

THX: Thanks

Question ID: THX.0080.00.1 Variable: THANKS_A Interview Module: Adult Content Type: Annual Core

Question Text:

* Thank respondent for answering these questions. If there is a Sample Child interview to complete, ask for appropriate person to respond to these questions.

Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Adults 18+

Skip Instructions:

<1> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0040.00.1 Variable: CURREC_C Interview Module: Child Content Type: Annual Core

Question Text:

The next questions are about ^SCNAME.

* Enter the line number of the person to whom you are speaking.

* If Sample Child respondent refuses to participate enter CTRL-R.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

01	Name of Person 1
02	Name of Person 2
03	Name of Person 3
04	Name of Person 4
05	Name of Person 5
06	Name of Person 6
07	Name of Person 7
08	Name of Person 8
09	Name of Person 9
10	Name of Person 10
11	Name of Person 11
12	Name of Person 12
13	Name of Person 13
14	Name of Person 14
15	Name of Person 15
16	Name of Person 16
17	Name of Person 17
18	Name of Person 18
19	Name of Person 19
20	Name of Person 20
21	Name of Person 21
22	Name of Person 22
23	Name of Person 23
24	Name of Person 24
25	Name of Person 25
97	Refused

Universe:

Sample Children 0-17

Skip Instructions:

```
<RF>  if CBSTAT_A=1[goto BCK.THANKS_CB]
else if OUTCOME=215 [goto BCK.THANKS_INSUF]
else [goto BCK.THANKS_SUF]
If CURRES_C not in Roster.FAM.KNOWSC [goto KNOAVAIL_C]
Else if CURRES_C ne LNO_HHRESP AND CURRES_C in Roster.FAM.KNOWSC [goto AVAIL_C]
Else if CURRES_C = LNO_HHRESP AND CURRES_C in Roster.FAM.KNOWSC AND CURRES_C not in
Roster.bREL.bPerson[PX_C].PARENTS[goto RELTIV_C]
Else if CURRES_C = LNO_HHRESP AND CURRES_C in Roster.FAM.KNOWSC AND CURRES_C in
Roster.bREL.bPerson[PX_C].PARENTS[goto VFYALL_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0060.00.1 **Variable:** KNOAVAIL_C **Interview Module:** Child **Content Type:** Annual Core

Question Text:

^KNOAVAIL_C_fill

* Enter the line number of available respondent from list or press F9 to set up a callback if no one is available or refused.

^KNOAVAIL_C_fill_2

Fills:

KNOAVAIL_C_fill	Description	FR Instruction/I have recorded that ^KNOWSC ^areis_c knowledgeable about and responsible for ^SCNAME's health care. ^WHOIS currently available and willing to answer these questions?
	Instruction	If (KnowSC_Count = ActiveNotKnow_Count) fill : "* If there are no other knowledgeable people to select then press the end key." ELSE fill : "I have recorded that ^KNOWSC ^areis_c knowledgeable about and responsible for ^SCNAME's health care. ^WHOIS currently available and willing to answer these questions?"
KNOWSC	Description	List of household members who are knowledgeable about and responsible for the Sample Child
	Instruction	KNOWSC = list of people identified as being knowledge about and responsible for ^SCNAME's health as selected in Roster.FAM.KNOWSC. Add "and" before last name if list > 1.
areis_c	Description	is/are
	Instruction	If KNOAVAIL_Count = 1, fill 'is', else fill 'are'
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
WHOIS	Description	Is {Value of ALIAS}/Who is
	Instruction	If KNOAVAIL_Count = 1, fill "Is Alias[I]" else fill "Who is"
KNOAVAIL_C_fill_2	Description	FR Instruction
	Instruction	If (ActiveNotKnow_Count > 0) fill : "* People listed in gray have said that they are not knowledgeable about the SC. If you incorrectly set someone as not knowledgeable then you may select that person and continue the interview."

Response:

01	Name of Person 1
02	Name of Person 2
03	Name of Person 3
04	Name of Person 4
05	Name of Person 5
06	Name of Person 6
07	Name of Person 7

08	Name of Person 8
09	Name of Person 9
10	Name of Person 10
11	Name of Person 11
12	Name of Person 12
13	Name of Person 13
14	Name of Person 14
15	Name of Person 15
16	Name of Person 16
17	Name of Person 17
18	Name of Person 18
19	Name of Person 19
20	Name of Person 20
21	Name of Person 21
22	Name of Person 22
23	Name of Person 23
24	Name of Person 24
25	Name of Person 25
97	Refused

Universe:

Sample Children 0-17 and at least one knowledgeable person is still eligible for selection and speaking to the initial respondent and they are not knowledgeable OR speaking to a new respondent

Skip Instructions:

```
<01-25> [goto INTMODE_C]
<RF> if CBSTAT_A=1[goto BCK.THANKS_CB]
else if OUTCOME=215 [goto BCK.THANKS_INSUF]
else [goto BCK.THANKS_SUF]
<F9> [goto bCallback.ARRANGE_CALLBACK]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0080.00.1 Variable: INTMODE_C Interview Module: Child Content Type: Annual Core

Question Text:

*How are you contacting ^KNOAVAIL_C?

Fills:

KNOAVAIL_C	Description	Name of person selected at KNOAVAIL_C
	Instruction	Display name of person whose line number was selected at KNOAVAIL_C

Response:

1	Personal visit
2	Telephone

Universe:

Sample Children 0-17 and interviewer is speaking to a new respondent

Skip Instructions:

```
<1> if HHRESPSC_FLG ne 1 [goto AVAIL_C]
else if HHRESPSC_FLG=1 and LNO_SCRESP not in Roster.bREL.bPerson[PX_C].PARENTS[goto RELTIV_C]
else [goto VFYALL_C]
<2> [goto TINTRO_C]
```


2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0090.00.1 Variable: TINTRO_C Interview Module: Child Content Type: Annual Core

Question Text:

Hello, my name is (* **say your name**). I'm calling from the U.S. Census Bureau. We are conducting the National Health Interview Survey on behalf of the National Center for Health Statistics, part of the Centers for Disease Control and Prevention (CDC). This is a nationwide survey about the health of both adults and children. I have some information from ^HHRESP. ^HHSEX told me that you would be a good person to talk to about the health of ^SCNAME.

* **Read if necessary:** *I believe I am calling you on a cell phone.*

Before we continue, I have to ask: Are you currently driving a vehicle?

* **Even if the respondent is using a hands-free device while driving, you must enter '1'.**

Fills:

HHRESP	Description	{Value of HHRESPAVAIL}
	Instruction	Display the name of the person selected at Roster.HHC.HHRESPAVAIL
HHSEX	Description	He/She/They
	Instruction	If GEN.SEX_FINAL[LNO_HHRESP]=1, fill: He elseif GEN.SEX_FINAL[LNO_HHRESP]=2, fill: She elseif GEN.SEX_FINAL[LNO_HHRESP] in (DK,RF), fill: They
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 and interviewer is conducting a telephone interview with new respondent

Skip Instructions:

<1,RF,DK> [goto ATTN_C]
<2> [goto LETTER_C]

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0100.00.1 Variable: ATTN_C Interview Module: Child Content Type: Annual Core

Question Text:

For your safety, we will call you back at another time.

* Enter 1 to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Children 0-17 and interviewer is conducting a telephone interview with new respondent who is driving

Skip Instructions:

<1> [goto bCallback.CB_POSSIBLE]

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0110.00.1 Variable: LETTER_C Interview Module: Child Content Type: Annual Core

Question Text:

- * If sample child respondent is a new respondent read question below, otherwise enter 1
- * **Read if necessary:** A letter describing the National Health Interview Survey was sent to your home recently. Do you remember seeing the letter?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 and interviewer is conducting a telephone interview with new respondent who is not driving

Skip Instructions:

<1,2,RF,DK> [goto S_INTRO_C]

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0120.00.1 Variable: S_INTRO_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

* If sample child respondent is a new respondent read question below, otherwise enter 1

* **Read if necessary:** *There are a few things I need to cover before we continue. I'd like you to know that taking part in this survey is voluntary. You may choose not to answer any questions you don't wish to answer, or end the interview at any time without penalty. We are required by Federal Law to develop and follow strict procedures to protect the confidentiality of your information and use your answers only for statistical research. I can describe these laws if you wish. Except for the National Center for Health Statistics and Census Bureau employees and specially designated agents, no one can see your answers until all information that could identify you and/or your family has been removed. Only after that will your data be made available to researchers. For most children, the survey will take less than ^SCTIME minutes. I'd like to continue now unless you have any questions.*

* If respondent asks for more information about the privacy laws, press F1.

Fills:

SCTIME	Description	20/30
	Instruction	If ASTAT=1 and SAMEFAM_FLG=1, fill: 20 Else, fill: 30

Response:

1	Enter 1 to Continue

Universe:

Sample Children 0-17 and interviewer is conducting a telephone interview with new respondent who is not driving

Skip Instructions:

```
<1> if HHRESPSC_FLG ne 1 [goto AVAIL_C]
else if HHRESPSC_FLG=1 and LNO_SCRESP not in Roster.bREL.bPerson[PX_C].PARENTS[goto RELTIV_C]
else [goto VFYALL_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0130.00.1 Variable: AVAIL_C Interview Module: Child Content Type: Annual Core

Question Text:

I have recorded that you are knowledgeable about and responsible for ^SCNAME's health care. Is that correct?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused

Universe:

Sample Children 0-17 and at least one knowledgeable person is still eligible for section AND initial respondent wasn't the HH Resp and is knowledgeable OR picked a new respondent and respondent is not driving

Skip Instructions:

```
<1>If (LNO_SCRESP not in Roster.bREL.bPerson[PX_C].PARENTS) {respondent is not a parent} [goto RELTIV_C]
Else If Roster.tb1Name.bPerson[PX_C].ONOFFCAMPUS in (1,RF,DK) {Sample Child is on campus} [goto VFYONCAMP_C]
Else [goto VFYALL_C]
<2> if KNOAVAIL_Count gt 0 [goto KNOAVAIL_C]
Else [goto NOMORE_C]
<RF> if CBSTAT_A=1[goto BCK.THANKS_CB]
else if OUTCOME=215 [goto BCK.THANKS_INSUF]
else [goto BCK.THANKS_SUF]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0150.00.1 Variable: RELTIV_C Interview Module: Child Content Type: Annual Core

Question Text:

What is your relationship to ^SCNAME?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

01	Parent (Biological, adoptive, or step)
02	Grandparent
03	Aunt/Uncle
04	Brother/Sister
05	Other relative
06	Legal guardian
07	Foster parent
08	Other non-relative
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 where the current respondent has not refused AND at least one person is knowledgeable about and responsible for the sample child AND the respondent is not driving while on the telephone AND the respondent has not refused or said he/she is not available AND the respondent was not identified as a parent in the roster section

Skip Instructions:

```
<9> [goto ERR_RELTIV_C]
<4,5,8,RF,DK> [goto VFYRESP_C]
<1,2,3,6,7> if Roster.tb1NAME.bPerson.[PX.C].ONOFFCAMPUS IN (1,RF,DK) and HHRESPSC_FLG ne 1
[goto VFYONCAMP_C]
Else [goto VFYALL_C]
```

Soft Edit:

Check Text	Check Description	Check Text
ERR_RELTIV_C	RELTIV_C soft edit	{signal ERR_RELTIV_C}
		The spouse or partner of the Sample Child cannot answer questions about him/her.

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0180.00.1 Variable: VFYRESP_C Interview Module: Child Content Type: Annual Core

Question Text:

To confirm, are you RESPONSIBLE FOR ^SCNAME's health care?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 where person identified as Child respondent is Brother/Sister, Other Relative, Other Non-relative, refused or don't know

Skip Instructions:

```
<2,RF,DK>if KNOAVAIL_Count > 0 [goto KNOAVAIL_C]
else [goto NOMORE_C]
<1> if Roster.tblName.bPerson[PX_C].ONOFFCAMPUS in (1,RF,DK) [goto VFYONCAMP_C]
Else [goto VFYALL_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0190.00.1 Variable: VFYONCAMP_C Interview Module: Child Content Type: Annual Core

Question Text:

I want to confirm some information.

Does ^SCNAME live in on-campus housing or off-campus housing?

***Read if necessary:** *On-campus housing includes residence halls and dorms where students live together. It also includes buildings that are owned, leased, or managed by the school. Fraternities and sororities are on-campus housing.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	On campus
2	Off campus
7	Refused
9	Don't Know

Universe:

A person who is knowledgeable or responsible for the sample child's health is available and the Sample Child is living in on-campus housing and the Sample Child respondent is not the household respondent and the Sample Child's spouse or partner is not the respondent

Skip Instructions:

<1,RF,DK> [goto VFYALL_C]
<2> [goto NOMORE_C]

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0200.00.1 Variable: VFYALL_C Interview Module: Child Content Type: Annual Core

Question Text:

* Please verify the following information about the sample child before proceeding:

I have recorded ^childvsex, ^AGE_C, ^NATORG_C, and ^RACE_C. Would you like to make any changes to this ^additionalinfo_C?

^RACEVRBATvalue_C

* If respondent "refuses" or says "don't know", enter "2" for "no."

Fills:

childvsex	Description	^SCNAME is male/^SCNAME is female/^SCNAME's sex is not known/^SCNAME's sex was not provided
	Instruction	If SEX_FINAL=1, fill: "^SCNAME is male" If SEX_FINAL=2, fill: "^SCNAME is female" If SEX_FINAL=DK, fill: "^SCNAME's sex is not known" If SEX_FINAL=RF, fill: "^SCNAME's sex was not provided"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
AGE_C	Description	^SCNAME is ^AGENO_C ^AGETP_C old/^SCNAME is under 18
	Instruction	If AGE_FINAL NE ('RF', 'DK'), fill: "^SCNAME is ^AGENO_C ^AGETP_C old" If AGE_FINAL IN ('RF', 'DK'), fill: "^SCNAME is under 18"
AGENO_C	Description	{Value of AGENO}
	Instruction	Fill value from Roster.HHC.AGENO[PX]
AGETP_C	Description	{Value of AGETP}
	Instruction	Fill value from Roster.HHC.AGETP[PX]
NATORG_C	Description	Verify Hispanic or Latino origin
	Instruction	If NATO_FINAL=1 fill: "^SCNAME is of Hispanic or Latino Origin" If NATO_FINAL=2 fill: "^SCNAME is not of Hispanic or Latino Origin" If NATO_FINAL=DK fill: "whether ^SCNAME is of Hispanic or Latino Origin is not known" If NATO_FINAL=RF fill: "information about whether ^SCNAME is of Hispanic or Latino Origin was not provided"
RACE_C	Description	^SCNAME is ^RACEFILLAND_C/^SCNAME's race is not known/^SCNAME's race was not provided
	Instruction	If GEN.RACE_FINAL[PX_C].RACE_FINAL NE 'RF' OR 'DK', fill: "^SCNAME is ^RACEFILLAND_C." If GEN.RACE_FINAL[PX_C].RACE_FINAL='DK', fill: ^SCNAME's race is not known" If GEN.RACE_FINAL[PX_C].RACE_FINAL='RF', fill: ^SCNAME's race was not provided"
RACEFILLAND_C	Description	Categories selected at the RACE screen
	Instruction	Fill categories selected at the GEN.RACE_FINAL [PX_C].RACE_FINAL screen. If more than two categories separate the categories with commas. Add the word "and" before the last category. For category 8 (GEN.RACE_FINAL[PX_C].RACE_FINAL=8), if GEN.RACE_FINAL[PX_C].RACE_SP_FINAL not in ['ZZ',RF,DK] display picklist selection from GEN.RACE_FINAL[PX_C].RACE_SP_FINAL elseif HHRESPSC_FLG=1 display GEN.RACE_FINAL [PX_C].RACE_VRBAT_FINAL else display "some other race"

additionalinfo_C	Description	if any information is missing "or provide additional information about"
	Instruction	See attachment for fill instructions
RACEVRBATvalue_C	Description	Information collected at RACE_VRBAT for Sample Child
	Instruction	IF GEN.HHRESPSC_FLG ne 1 and GEN.RACE_FINAL [PX_C].RACE_VRBAT_FINAL ne (empty,RF,DK), fill "*" If respondent wants information on which other race ^SCNAME is listed as, say ^RACE_VRBAT."
RACE_VRBAT	Description	{Value of RACE_VRBAT_FINAL}
	Instruction	Fill value from GEN.RACE_FINAL[PX].RACE_VRBAT_FINAL

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 where a person who is knowledgeable or responsible for the sample child's health has been identified and that knowledgeable person has not refused and the Sample Child lives on campus or refused or don't know and the Sample Child's spouse or partner is not the respondent

Skip Instructions:

```

<1> [goto VFYDEM_C]
<2> if GEN.SEX_FINAL[PX_C] IN (RF,DK) [goto SEXGUESS_C]
elseif NATO_FINAL=1 [goto HISPTYPE_C]
elseif RACE_FINAL=6 [goto PITYPE_C]
elseif RACE_FINAL=7 [goto ASIANTYPE_C]
elseif RACE_FINAL=8 [goto RACEOTHER_C]
else [goto BMONTH_C]

```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0210.00.1 Variable: VFYDEM_C Interview Module: Child Content Type: Annual Core

Question Text:

- * **Read if necessary:** *What should I change?*
- * **Enter all that apply, separate with commas.**

Fills:

Response:

1	Sex
2	Age
3	Hispanic or Latino Origin
4	Race
7	Refused
9	Don't Know

Universe:

Sample children 0-17 would like to change demographic information

Skip Instructions:

```
If 1 NOT IN VFYDEM_C and GEN.SEX_FINAL[PX_C] IN (DK,RF) [goto SEXGUESS_C]
elseif 1 IN VFYDEM_C [goto NEWSEX_C]
elseif 2 IN VFYDEM_C [goto NEWAGENO_C]
elseif 3 IN VFYDEM_C [goto NEWNATORG_C]
elseif 4 IN VFYDEM_C [goto NEWRACE_C]
<RF,DK> If GEN.SEX_FINAL[PX_C] IN (DK,RF) [goto SEXGUESS_C]

elseif NATO_FINAL=1 [goto HISPTYPE_C]
elseif RACE_FINAL=6 [goto PITYPE_C]
elseif RACE_FINAL=7 [goto ASIANTYPE_C]
elseif RACE_FINAL=8 [goto RACEOTHER_C]
else [goto BMONTH_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0220.00.1 Variable: NEWSEX_C Interview Module: Child Content Type: Annual Core

Question Text:

Is ^SCNAME male or female?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Male
2	Female
7	Refused
9	Don't Know

Universe:

Respondent said sample child's sex is not correct

Skip Instructions:

```
if GEN.SEX_FINAL[PX_C]=RF,DK and NEWSEX_C=RF,DK [goto SEXGUESS_C]
elseif 2 IN VFYDEM_C [goto NEWAGENO_C]
elseif 3 IN VFYDEM_C [goto NEWNATORG_C]
elseif 4 IN VFYDEM_C [goto NEWRACE_C]
elseif NATO_FINAL=1 [goto HISPTYPE_C]
elseif RACE_FINAL=6 [goto PITYPE_C]
elseif RACE_FINAL=7 [goto ASIANTYPE_C]
elseif RACE_FINAL=8 [goto RACEOTHER_C]
else [goto BMONTH_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0230.00.1 Variable: SEXGUESS_C Interview Module: Child Content Type: Annual Core

Question Text:

*Enter your best guess of ^SCNAME's sex

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Male
2	Female

Universe:

Sample children for whom there is no sex provided by the household respondent and did not give a sex when asked to verify information and the Sample Child's spouse or partner is not the respondent

Skip Instructions:

```
<1,2>
if 2 IN VFYDEM_C [goto NEWAGENO_C]
elseif 3 IN VFYDEM_C [goto NEWNATORG_C]
elseif 4 IN VFYDEM_C [goto NEWRACE_C]
elseif NATO_FINAL=1 [goto HISPTYPE_C]
elseif RACE_FINAL=6 [goto PITYPE_C]
elseif RACE_FINAL=7 [goto ASIANATYPE_C]
elseif RACE_FINAL=8 [goto RACEOTHER_C]
else [goto BMONTH_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0240.01.1 Variable: NEWAGENO_C Interview Module: Child Content Type: Annual Core

Question Text:

* 1 of 2

How old is ^SCNAME?

* Enter number for age.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

001-120	Range of values
997	Refused
999	Don't Know

Universe:

Sample Children 0-17 whose age is not correct

Skip Instructions:

goto [NEWAGETP_C]

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0240.02.1 Variable: NEWAGETP_C Interview Module: Child Content Type: Annual Core

Question Text:

* 2 of 2

* Enter number for age time period.

Fills:

Response:

1	Day(s)
2	Week(s)
3	Month(s)
4	Year(s)

Universe:

Valid number entered at NEWAGENO_C

Skip Instructions:

```
<1,2,3,4> if 3 IN VFYDEM_C [goto NEWNATORG_C]
elseif 4 IN VFYDEM_C [goto NEWRACE_C]
elseif NATO_FINAL=1 [goto HISPTYPE_C]
elseif RACE_FINAL=6 [goto PITYPE_C]
elseif RACE_FINAL=7 [goto ASIANTYPE_C]
elseif RACE_FINAL=8 [goto RACEOTHER_C]
else [goto BMONTH_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0260.00.1 Variable: NEWNATORG_C Interview Module: Child Content Type: Annual Core

Question Text:

Is ^SCNAME Hispanic or Latino?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 whose Hispanic Origin is not correct

Skip Instructions:

```
<1,2,RF,DK> if 4 IN VFYDEM_C [goto NEWRACE_C]
elseif NATO_FINAL=1 [goto HISPTYPE_C]
elseif RACE_FINAL=6 [goto PITYPE_C]
elseif RACE_FINAL=7 [goto ASIANTYPE_C]
elseif RACE_FINAL=8 [goto RACEOTHER_C]
else [goto BMONTH_C]
```


2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0270.00.1 Variable: NEWRACE_C Interview Module: Child Content Type: Annual Core

Question Text:

What race or races is ^SCNAME? Please select 1 or more of these categories:

White, Black, African American, American Indian, Alaska Native, Native Hawaiian, Pacific Islander, Asian, or some other race?

* Enter all that apply, separate with commas.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

01	White
02	Black/African American
03	American Indian
04	Alaska Native
05	Native Hawaiian
06	Other Pacific Islander
07	Asian
08	Some other race
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 whose race is not correct

Skip Instructions:

```
if NATO_FINAL=1 [goto HISPTYPE_C]
elseif RACE_FINAL=6 [goto PITYPE_C]
elseif RACE_FINAL=7 [goto ASIANTYPE_C]
elseif RACE_FINAL=8 [goto RACEOTHER_C]
else [goto BMONTH_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0280.00.1 Variable: HISPTYPE_C Interview Module: Child Content Type: Annual Core

Question Text:

What is ^SCNAME's Hispanic or Latino ancestry or origin, such as Mexican, Mexican American, ^CHICANOA, Central or South American, Puerto Rican, Cuban, Dominican (Republic), or Other Hispanic, ^LATINOA, or Spanish -- and if ^SCNAME has more than one, tell me all of them.

* Enter all that apply, separate with commas.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
CHICANOA	Description	Chicano/Chicano or Chicana
	Instruction	If SEX_FINAL = 1 fill: "Chicano" if SEX_FINAL = 2,DK,RF fill "Chicano or Chicana"
LATINOA	Description	Latino/Latino or Latina
	Instruction	If SEX_FINAL= 1 fill: "Latino" if SEX_FINAL = 2,DK,RF fill "Latino or Latina"

Response:

01	Mexican, Mexican American, or Chicano(a)
02	Central American
03	South American
04	Puerto Rican
05	Cuban
06	Dominican (Republic)
07	Other Hispanic, Latino(a), or Spanish (specify)
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 are of Hispanic Origin and a person who is knowledgeable or responsible for the sample child's health has been identified and that knowledgeable person has not refused and the Sample Child lives on campus or refused or don't know and the Sample Child's spouse or partner is not the respondent

Skip Instructions:

```
<7> [goto HISPOTHER_C]
<1-6,RF,DK>
if GEN.RACE_FINAL[PX_C]=6 [goto PITYPE_C]
elseif GEN.RACE_FINAL[PX_C]=7 [goto ASIANTYPE_C]
elseif GEN.RACE_FINAL[PX_C]=8 and (NEWRACE_C=8 or (HHRESPSC_FLG ne 1 and RACE_SP[PX_C] in
(ZZ,RF,DK))) [goto RACEOTHER_C]
else [goto BMONTH_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0290.00.1 Variable: HISPOTHER_C Interview Module: Child Content Type: Annual Core

Question Text:

[F1]

What is ^SCNAME's Hispanic or Latino ancestry or origin? If ^SCNAME has more than one, tell me all of them.

Start typing and then select from list. If Hispanic or Latino ancestry is not on the list, type "ZZ" and enter verbatim.

If any of the following are mentioned, backup to previous screen and correct the entry.

Mexican

Mexican American

Chicano/Chicana

Central American (REFER TO HELP SCREEN)

South American (REFER TO HELP SCREEN)

Puerto Rican (Boricua)

Cuban/Cuban American

Dominican (Republic)

* If respondent provides more than one other Hispanic or Latino ancestry or origin, select 'ZZ' from the lookup table. At the next question, enter ALL the other Hispanic or Latino ancestries or origins in the verbatim field.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
ZZ	Other
97	Refused
99	Don't Know

Universe:

Sample Child is of Other Hispanic Origin

Skip Instructions:

```
<ZZ> [goto HISPVRBAT_C]
<lookup table selection,RF,DK>
if GEN.RACE_FINAL[PX_C]=6 [goto PITYPE_C]
elseif GEN.RACE_FINAL[PX_C]=7 [goto ASIANTYPE_C]
elseif GEN.RACE_FINAL[PX_C]=8 and (NEWRACE_C=8 or (GEN.HHRESPSC_FLG ne 1 and Roster.HHC.RACE_SP
[PX_C] in (ZZ,RF,DK))) [goto RACEOTHER_C]
else [goto BMONTH_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0300.00.1 Variable: HISPVRBAT_C Interview Module: Child Content Type: Annual Core

Question Text:

* **Read if necessary:** What is ^SCNAME's Hispanic or Latino ancestry or origin? If ^SCNAME has more than one, tell me all of them.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Child 0-17 where some other Hispanic Ancestry is reported and this is not chosen from the picklist

Skip Instructions:

```
<allow 80,RF,DK> if GEN.RACE_FINAL[PX_C]=6 [goto PITYPE_C]
elseif GEN.RACE_FINAL[PX_C]=7 [goto ASIANTYPE_C]
elseif GEN.RACE_FINAL[PX_C]=8 and (NEWRACE_C=8 or (GEN.HHRESPSC_FLG ne 1 and Roster.HHC.RACE_SP
[PX_C] in (ZZ,RF,DK))) [goto RACEOTHER_C]
else [goto BMONTH_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0310.00.1 Variable: PITYPE_C Interview Module: Child Content Type: Annual Core

Question Text:

I have recorded that ^SCNAME is Pacific Islander. What specific ethnic group or groups is ^SCNAME-- such as Guamanian or Chamorro, Samoan, or other Pacific Islander? If ^SCNAME is more than one, tell me all of them.

* Enter all that apply, separate with comma

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Guamanian or Chamorro
2	Samoan
3	Other Pacific Islander
7	Refused
9	Don't Know

Universe:

Sample children 0-17 identified as Pacific Islanders and a person who is knowledgeable or responsible for the sample child's health has been identified and that knowledgeable person has not refused and the Sample Child lives on campus or refused or don't know and the Sample Child's spouse or partner is not the respondent

Skip Instructions:

```
<3> [goto PIOTHER_C]
<1,2,RF,DK> if GEN.RACE_FINAL[PX_C]=7 [goto ASIANTYPE_C]
elseif GEN.RACE_FINAL[PX_C]=8 and (NEWRACE_C=8 or (GEN.HHRESPSC_FLG ne 1 and Roster.HHC.RACE_SP
[PX_C] in (ZZ,RF,DK))) [goto RACEOTHER_C]
else [goto BMONTH_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0320.00.1 Variable: PIOTHER_C Interview Module: Child Content Type: Annual Core

Question Text:

* **Read if necessary:** *I have recorded that ^SCNAME is Pacific Islander. What specific ethnic group or groups is ^SCNAME? If ^SCNAME is more than one, tell me all of them.*

* **Start typing and then select from list.** If Pacific Islander ethnic group is not on the list, type "ZZ" and enter verbatim.

* **If respondent provides more than one ethnic group, select 'ZZ' from the lookup table. At the next question, enter ALL the ethnic groups in the verbatim field.**

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
ZZ	Other
97	Refused
99	Don't Know

Universe:

Sample Child who is "Other Pacific Islander"

Skip Instructions:

```
<ZZ> [goto PIVRBAT_C]
<lookup table selection, RF, DK>
if GEN.RACE_FINAL[PX_C]=7 [goto ASIANTYPE_C]
elseif GEN.RACE_FINAL[PX_C]=8 and (NEWRACE_C=8 or (GEN.HHRESPSC_FLG ne 1 and Roster.HHC.RACE_SP
[PX_C] in (ZZ,RF,DK))) [goto RACEOTHER_C]
else [goto BMONTH_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0330.00.1 Variable: PIVRBAT_C Interview Module: Child Content Type: Annual Core

Question Text:

* **Read if necessary:** *I have recorded that ^SCNAME is Pacific Islander. What specific ethnic group or groups is ^SCNAME? If ^SCNAME is more than one, tell me all of them.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Child are some other group of Pacific Islander and this is not chosen from the picklist

Skip Instructions:

```
<allow 80,RF,DK>
if GEN.RACE_FINAL[PX_C]=7 [goto ASIAN_TYPE_C]
elseif GEN.RACE_FINAL[PX_C]=8 and (NEW_RACE_C=8 or (GEN.HHRESPSC_FLG ne 1 and Roster.HHC.RACE_SP
[PX_C] in (ZZ,RF,DK))) [goto RACE_OTHER_C]
else [goto BMONTH_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0340.00.1 Variable: ASIANTYPE_C Interview Module: Child Content Type: Annual Core

Question Text:

I have recorded that ^SCNAME is Asian. What specific ethnic group or groups is ^SCNAME-- such as Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese, or Other Asian? If ^SCNAME is more than one, tell me all of them.

* Enter all that apply, separate with commas.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

01	Asian Indian
02	Chinese
03	Filipino
04	Japanese
05	Korean
06	Vietnamese
07	Other Asian
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 identified as Asian and a person who is knowledgeable or responsible for the sample child's health has been identified and that knowledgeable person has not refused and the Sample Child lives on campus or refused or don't know and the Sample Child's spouse or partner is not the respondent

Skip Instructions:

```
<7> [goto ASIANOTHER_C]
<1-6,RF,DK>
elseif GEN.RACE_FINAL[PX_C]=8 and (NEWRACE_C=8 or (GEN.HHRESPSC_FLG ne 1 and Roster.HHC.RACE_SP
[PX_C] in (ZZ,RF,DK))) [goto RACEOTHER_C]
else [goto BMONTH_C]
```


2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0350.00.1 Variable: ASIANOTHER_C Interview Module: Child Content Type: Annual Core

Question Text:

What is ^SCNAME's specific Asian ethnic group or groups? If ^SCNAME has more than one, tell me all of them.

Start typing and then select from list. If Asian ethnic group is not on the list, type "ZZ" and enter verbatim.

If any of the following are mentioned, backup to previous screen and correct the entry.

(Asian) Indian

Chinese

Filipino

Japanese

Korean

Vietnamese

* If respondent provides more than one ethnic group, select 'ZZ' from the lookup table. At the next question, enter ALL the ethnic groups in the verbatim field.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
ZZ	Other
97	Refused
99	Don't Know

Universe:

Sample Child who is "other Asian"

Skip Instructions:

```
<ZZ> [goto ASIANVRBAT_C]
<lookup table selection,RF,DK>
if GEN.RACE_FINAL[PX_C]=8 and (NEWRACE_C=8 or (NEWRACE_C=EMPTY and GEN.HHRESPSC_FLG ne 1 and
ROSTER.HHC.RACE_SP[PX_C] IN (ZZ,RF,DK))) [goto RACEOTHER_C]
else [goto BMONTH_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0360.00.1 Variable: ASIANVRBAT_C Interview Module: Child Content Type: Annual Core

Question Text:

* **Read if necessary:** What is ^SCNAME's specific Asian ethnic group or groups? If ^SCNAME has more than one, tell me all of them.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Child is some other ethnic group of Asian and this is not chosen from the picklist

Skip Instructions:

```
<allow 80,RF,DK>
if GEN.RACE_FINAL[PX_C]=8 and (NEWRACE_C=8 or (NEWRACE_C=EMPTY and GEN.HHRESPSC_FLG ne 1 and
ROSTER.HHC.RACE_SP[PX_C] IN (ZZ,RF,DK))) [goto RACEOTHER_C]
else [goto BMONTH_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0370.00.1 Variable: RACEOTHER_C Interview Module: Child Content Type: Annual Core

Question Text:

What other race or races is ^SCNAME?

Start typing and then select from list. If race is not on the list, type "ZZ" and enter verbatim.

* If respondent provides more than one other race, select 'ZZ' from the lookup table. At the next question, enter ALL the other races in the verbatim field.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
ZZ	Other
97	Refused
99	Don't Know

Universe:

Sample Child's race was changed to "some other race" in verification section or where the Sample Child respondent is not the Household respondent and were identified by the household respondent as being "some other race" not on the roster other race picklist and a person who is knowledgeable or responsible for the sample child's health has been identified and that knowledgeable person has not refused and the Sample Child lives on campus or refused or don't know and the Sample Child's spouse or partner is not the respondent

Skip Instructions:

<ZZ> [goto RACEVRBAT_C]
<lookup table selection, RF,DK> [goto BMONTH_C]

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0380.00.1 Variable: RACEVRBAT_C Interview Module: Child Content Type: Annual Core

Question Text:

* **Read if necessary:** *What other race or races is ^SCNAME?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Child's race was change to include "some other race" in verification section or where the Sample Child respondent is not the Household respondent and were identified by the household respondent as being "some other race" not on the roster other race picklist and the Sample Child Respondent did not select it from the Sample Adult other race picklist.

Skip Instructions:

<verbatim,RF,DK> [goto BMONTH_C]

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0410.01.1 Variable: BMONTH_C Interview Module: Child Content Type: Annual Core

Question Text:

* 1 of 3

What is ^SCNAME's date of birth?
Please give month, day, and year for the date of birth.

* Enter month of birth.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

01	January
02	February
03	March
04	April
05	May
06	June
07	July
08	August
09	September
10	October
11	November
12	December
97	Refused
99	Don't Know

Universe:

A person who is knowledgeable or responsible for the sample child's health is available or there is only one parent over 18 and no other adults in the child's family or there are more than two adults and one of them is a parent who was identified as available at AVAIL_C AND date of birth was verified as incorrect fewer than 2 times and the Sample Child's spouse or partner is not the respondent

Skip Instructions:

<1-12,RF,DK> [goto BDAY_C]

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0410.02.1 Variable: BDAY_C Interview Module: Child Content Type: Annual Core

Question Text:

* 2 of 3

* Enter day of birth.

Fills:

Response:

01-31	Range of values
97	Refused
99	Don't Know

Universe:

A person who is knowledgeable or responsible for the sample child's health is available or there is only one parent over 18 and no other adults in the child's family or there are more than two adults and one of them is a parent who was identified as available at AVAIL_C AND date of birth was verified as incorrect fewer than 2 times and the Sample Child's spouse or partner is not the respondent

Skip Instructions:

<1-31,RF,DK> Only allow valid days for month entered. if days not valid [goto ERR_BDAY_C]
else [goto BYEAR_C]

Hard Edit:

Check Text	Check Description	Check Text
ERR_BDAY_C	Invalid day for selected month hard edit	{check ERR_BDAY_C} ^BDAY_C is not a valid day for ^BMONTH_C.

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0410.03.1 Variable: BYEAR_C Interview Module: Child Content Type: Annual Core

Question Text:

- * 3 of 3
- * Enter year of birth.

Fills:

Response:

Year	Year
9997	Refused
9999	Don't Know

Universe:

A person who is knowledgeable or responsible for the sample child's health is available or there is only one parent over 18 and no other adults in the child's family or there are more than two adults and one of them is a parent who was identified as available at AVAIL_C AND date of birth was verified as incorrect fewer than 2 times and the Sample Child's spouse or partner is not the respondent

Skip Instructions:

```
<1900-current year,RF,DK>
if (BYEAR_C gt current year) or (BYEAR_C=current year and BMONTH_C gt current month) or
(BYEAR_C=current year and BMONTH_C=current month and BDAY_C gt current day) [goto ERR_BYEAR_C]

elseif BDAY_C=29 and BMONTH_C=2 and (BYEAR=2000 or BYEAR_C/4 remainder ne 0) [goto
ERR_BDAYLEAP_C]

elseif AGETEMP_C in (RF,DK) AND BYEAR_C in (RF,DK) [goto NOMORE_C]

elseif ((BYEAR_C not IN (RF,DK) and AGETEMP_C not IN (RF,DK) and AGETEMP_C ne AGE_CALC_C) AND
(AGETEMP_C not IN (RF,DK) and AGETEMP_C ne AGE_CALCMINUS1_C)) and DOB_COUNT_C ne 1 [goto
VFYDOB_C]

elseif (AGETEMP_C eq AGE_CALC_C or AGE_CALCMINUS1_C) or DOB_COUNT_C=1
  if AGE_FINAL ge 18 [goto NOMORE_C]
  else [goto next section]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR_BDAYLEAP_C	Invalid day for selected month hard edit	{check ERR_BDAYLEAP_C} ^BDAY_C is not a valid day for ^BMONTH_C.
ERR_BYEAR_C	Future date hard edit	{check ERR_BYEAR_C} Future date invalid.

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0430.00.1 **Variable:** VFYDOB_C **Interview Module:** Child **Content Type:** Annual Core

Question Text:

There is a difference between the age the computer calculated from ^SCNAME's date of birth of ^AGEDOB_C_fill and the age I had previously recorded of ^TEMPAGE_C.

I recorded ^SCNAME's ^dateofbirth_C

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
AGEDOB_C_fill	Description	Age(s) calculated from Date of Birth for SC
	Instruction	Fill one age calculated from AGE_CALC_C as "(age) year(s) old" Fill two ages calculated from AGE_CALC_C and AGE_CALCMINUS1_C as "(age) or (age) year(s) old" If AGE_CALC_C or AGE_CALCMINUS1_C is equal to 0, then display as "less than 1"
TEMPAGE_C	Description	{Value of AGETEMP_C} year(s) old/less than 1
	Instruction	fill value of AGETEMP_C as "(age) year(s) old" If AGETEMP_C is equal to 0, then display as "less than 1"
dateofbirth_C	Description	date of birth when any of BDAY_C, BMONTH_C or BYEAR_C are not valid
	Instruction	If BDAY_C, BMONTH_C and BYEAR_C are all valid, fill: "date of birth as ^BMONTH_C ^BDAY_C, ^BYEAR_C, is that correct?" If only BMONTH_C and BYEAR_C are valid, fill: "date of birth as ^BMONTH_C ^BYEAR_C, is that correct?" If only BDAY_C and BYEAR_C are valid, fill: "year of birth as ^BYEAR_C, is that correct?" If only BYEAR_C is valid, fill: "year of birth as ^BYEAR_C, is that correct?"
BMONTH_C	Description	{Value of BMONTH_C}
	Instruction	Fill value from Child.VFY.BMONTH_C
BDAY_C	Description	{Value of BDAY_C}
	Instruction	Fill value from Child.VFY.BDAY_C
BYEAR_C	Description	{Value of BYEAR_C}
	Instruction	Fill value from Child.VFY.BYEAR_C

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children whose age provided in either HHC or NEWAGE_C does not match either age calculated from date of birth information and the Sample Child's spouse or partner is not the respondent

Skip Instructions:

```
<1,RF,DK> if GEN.AGE_FINAL[PX_C] ge 18 [goto NOMORE_C]  
else [goto next section]
```

```
<2> if DOB_COUNT_C le 1 [goto BMONTH_C]  
elseif GEN.AGE_FINAL[PX_C] ge 18 [goto NOMORE_C]  
else [goto next section]
```

2025 National Health Interview Survey (NHIS) Questionnaire

VFY: Verification and demographic details

Question ID: VFY.0440.00.1 Variable: NOMORE_C Interview Module: Child Content Type: Annual Core

Question Text:

* ^SCNAME no longer meets the requirements to be sample child for this family. End this interview and begin the Sample Adult Interview. If there is no Sample Adult or the Sample Adult interview has been completed, EXIT

^auxNoMore

Not everyone in our survey is asked all questions. I have all the information that I need from you about ^SCNAME.

* Enter '1' to continue.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
auxNoMore	Description	If there is still a knowledgeable respondent available, back up and select that person.
	Instruction	IF KNOAVAIL_Count = 0, fill "*" If there is still a knowledgeable respondent available, back up and select that person."

Response:

1	Enter 1 to Continue

Universe:

Sample child whose age is now over 17 or whose age is refused or don't know or who lives off-campus or there is no knowledgeable sample child respondent

Skip Instructions:

If there is a callback set for Sample Adult [goto BCK.THANKS_CB]
else if GEN.OUTCOME IN 215 [goto BCK.THANKS_INSUF]
else [goto BCK.THANKS_SUF]

2025 National Health Interview Survey (NHIS) Questionnaire

HIS: Health Status

Question ID: HIS.0010.00.1 Variable: PHSTAT_C Interview Module: Child Content Type: Annual Core

Question Text:

Would you say ^SCNAME's health in general is excellent, very good, good, fair, or poor?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Excellent
2	Very Good
3	Good
4	Fair
5	Poor
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1-5,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

AST: Asthma

Question ID: AST.0010.00.1 Variable: ASTINTRO_C Interview Module: Child Content Type: Annual Core

Question Text:

Now I am going to ask you about certain medical conditions.

* Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto ASEV_C]

2025 National Health Interview Survey (NHIS) Questionnaire

AST: Asthma

Question ID: AST.0020.00.1 Variable: ASEV_C Interview Module: Child Content Type: Annual Core

Question Text:

Has a doctor or other health professional EVER told you that ^SCNAME had asthma?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto ASTILL_C]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

AST: Asthma

Question ID: AST.0030.00.1 Variable: ASTILL_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME still have asthma?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who were ever told they have asthma

Skip Instructions:

<1,2,RF,DK> [goto ASAT12M_C]

2025 National Health Interview Survey (NHIS) Questionnaire

AST: Asthma

Question ID: AST.0040.00.1 Variable: ASAT12M_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, has ^SCNAME had an episode of asthma or an asthma attack?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who were ever told they had asthma

Skip Instructions:

<1,2,RF,DK> [goto ASER12M_C]

2025 National Health Interview Survey (NHIS) Questionnaire

AST: Asthma

Question ID: AST.0050.00.1 Variable: ASER12M_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, did ^SCNAME have to visit an emergency room or urgent care center because of ^hisher_C asthma?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who were ever told they had asthma

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0010.00.1 Variable: PREDIB_C Interview Module: Child Content Type: Annual Core

Question Text:

Has a doctor or other health professional EVER told you that ^SCNAME had prediabetes or
borderline diabetes?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample children 0-17

Skip Instructions:

<1,2,RF,DK> [goto DIBEV_C]

2025 National Health Interview Survey (NHIS) Questionnaire

DIB: Diabetes

Question ID: DIB.0020.00.1 Variable: DIBEV_C Interview Module: Child Content Type: Annual Core

Question Text:

^NOTPRED a doctor or other health professional EVER told you that ^SCNAME had diabetes?

Fills:

NOTPRED	Description	Not including prediabetes, has/Has
	Instruction	If PREDIB_C=1: "Not including prediabetes, has" If PREDIB_C IN ('2','DK','RF'): "Has"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

DLD: Developmental and Learning Disabilities

Question ID: DLD.0010.00.1 Variable: ADHDEV_C Interview Module: Child Content Type: Annual Core

Question Text:

Has a doctor or other health professional ever told you that ^SCNAME had Attention-Deficit/Hyperactivity Disorder or ADHD or Attention-Deficit Disorder or ADD?

* **Read if necessary:** *Health professionals can include school psychologists and school nurses.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1> [goto ADHDNW_C]
<2,RF,DK> [goto IDEV1_C]

2025 National Health Interview Survey (NHIS) Questionnaire

DLD: Developmental and Learning Disabilities

Question ID: DLD.0020.00.1 Variable: ADHDNW_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME currently have Attention-Deficit/Hyperactivity Disorder or ADHD or Attention-Deficit Disorder or ADD?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 2-17 who had an ADHD diagnosis

Skip Instructions:

<1,2,RF,DK> [goto IDEV1_C]

2025 National Health Interview Survey (NHIS) Questionnaire

DLD: Developmental and Learning Disabilities

Question ID: DLD.0030.00.1 Variable: IDEV1_C Interview Module: Child Content Type: Annual Core

Question Text:

Has a doctor or other health professional ever told you that ^SCNAME had an intellectual disability, previously known as mental retardation?

* **Read if necessary:** *Health professionals can include school psychologists and school nurses.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto IDNW1_C]
 <2,RF,DK> [goto ASDEV_C] if GEN.AGE_FINAL[PX_C] ge 2 and GEN.AGE_FINAL[PX_C] le 17, else [goto DDEV_C]

2025 National Health Interview Survey (NHIS) Questionnaire

DLD: Developmental and Learning Disabilities

Question ID: DLD.0040.00.1 Variable: IDNW1_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME currently have an intellectual disability, previously known as mental retardation?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who had an intellectual disability diagnosis

Skip Instructions:

<1,2,RF,DK> if GEN.AGE_FINAL[PX_C] ge 2 and GEN.AGE_FINAL[PX_C] le 17 [goto ASDEV_C]
else [goto DDEV_C]

2025 National Health Interview Survey (NHIS) Questionnaire

DLD: Developmental and Learning Disabilities

Question ID: DLD.0050.00.1 Variable: ASDEV_C Interview Module: Child Content Type: Annual Core

Question Text:

Has a doctor or other health professional ever told you that ^SCNAME had Autism, Asperger's disorder, pervasive developmental disorder, or autism spectrum disorder?

* **Read if necessary:** *Health professionals can include school psychologists and school nurses.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1> [goto ASDNW_C]
<2,RF,DK> [goto DDEV_C]

2025 National Health Interview Survey (NHIS) Questionnaire

DLD: Developmental and Learning Disabilities

Question ID: DLD.0060.00.1 Variable: ASDNW_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME currently have Autism, Asperger's disorder, pervasive developmental disorder, or autism spectrum disorder?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 2-17 who had an autism spectrum disorder diagnosis

Skip Instructions:

<1,2,RF,DK> [goto DDEV_C]

2025 National Health Interview Survey (NHIS) Questionnaire

DLD: Developmental and Learning Disabilities

Question ID: DLD.0070.00.1 Variable: DDEV_C Interview Module: Child Content Type: Annual Core

Question Text:

^NOTEVER a doctor or other health professional ever told you that ^SCNAME had any other developmental delay?

* **Read if necessary:** *Health professionals can include school psychologists and school nurses.*

* **Read if necessary:** *Developmental delays are significant delays in a child's development. Examples include cognitive, motor, speech, social, emotional and behavioral delays.*

Fills:

NOTEVER	Description	Has/Not including (ADHD, intellectual disability, autism spectrum disorder), has
	Instruction	If ADHDEV_C ne 1 AND IDEV1_C ne 1 and ASDEV_C ne 1 fill: "Has" If ADHDEV_C=1 AND IDEV1_C ne 1 and ASDEV_C ne 1 fill: "Not including ADHD, has" If ADHDEV_C ne 1 AND IDEV1_C=1 and ASDEV_C ne 1 fill: "Not including an intellectual disability, has" If ADHDEV_C ne 1 AND IDEV1_C ne 1 and ASDEV_C=1 fill: "Not including autism spectrum disorder, has" If ADHDEV_C=1 AND IDEV1_C=1 and ASDEV_C ne fill: "Not including ADHD or an intellectual disability, has" If ADHDEV_C=1 AND IDEV1_C ne 1 and ASDEV_C=1 fill: "Not including ADHD or autism spectrum disorder, has" If ADHDEV_C ne 1 AND IDEV1_C=1 and ASDEV_C=1 fill: "Not including an intellectual disability or autism spectrum disorder, has" If ADHDEV_C=1 AND IDEV1_C=1 and ASDEV_C=1 fill: "Not including ADHD, an intellectual disability or autism spectrum disorder, has"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

```
<1> [goto DDNW_C]
<2,Rf,DK> if GEN.AGE_FINAL[PX_C] ge 2 and GEN.AGE_FINAL[PX_C] le 17 [goto LDEV_C]
else [goto next section]
```

2025 National Health Interview Survey (NHIS) Questionnaire

DLD: Developmental and Learning Disabilities

Question ID: DLD.0080.00.1 Variable: DDNW_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME still have this other developmental delay?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who had any other developmental delay diagnosis

Skip Instructions:

<1,2,RF,DK> if GEN.AGE_FINAL[PX_C] ge 2 and GEN.AGE_FINAL[PX_C] le 17 [goto LDEV_C]
else [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

DLD: Developmental and Learning Disabilities

Question ID: DLD.0090.00.1 Variable: LDEV_C Interview Module: Child Content Type: Annual Core

Question Text:

Has a representative from a school or a health professional ever told you that ^SCNAME had a learning disability?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1> [goto LDNW_C]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

DLD: Developmental and Learning Disabilities

Question ID: DLD.0100.00.1 Variable: LDNW_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME currently have a learning disability?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 2-17 who had a learning disability diagnosis

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

VIS: Vision

Question ID: VIS.0010.00.1 Variable: VISINTRO_C Interview Module: Child Content Type: Annual Core

Question Text:

I would like to ask you some questions about difficulties ^SCNAME may have.

* Enter '1' to continue.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Enter 1 to Continue

Universe:

Sample Children 2-17

Skip Instructions:

<1> [goto WEARGLSS_C]

2025 National Health Interview Survey (NHIS) Questionnaire

VIS: Vision

Question ID: VIS.0020.00.1 Variable: WEARGLSS_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME wear glasses ^CONTACTS?

* **Read if necessary:** *Persons who wear glasses to read or to do other occasional tasks should answer yes to this question.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
CONTACTS	Description	or contact lenses
	Instruction	If AGE=5-17 fill "or contact lenses"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1,2,RF,DK> [goto VISIONDF_C]

2025 National Health Interview Survey (NHIS) Questionnaire

VIS: Vision

Question ID: VIS.0030.00.1 Variable: VISIONDF_C Interview Module: Child Content Type: Annual Core

Question Text:

^GLASSCONTACT ^SCNAME have difficulty seeing? Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe_C cannot do this at all?

Fills:

GLASSCONTACT	Description	When wearing glasses ^CONTACTS does/Does
	Instruction	If WEARGLSS_C=1 fill "When wearing glasses ^CONTACTS does" else if WEARGLSS_C ne 1 "Does"
CONTACTS	Description	or contact lenses
	Instruction	If AGE=5-17 fill "or contact lenses"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1-4,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

HEA: Hearing

Question ID: HEA.0010.00.1 Variable: HEARAIID_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME use a hearing aid?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1,2,RF,DK> [goto HEARINGDF_C]

2025 National Health Interview Survey (NHIS) Questionnaire

HEA: Hearing

Question ID: HEA.0020.00.1 Variable: HEARINGDF_C Interview Module: Child Content Type: Annual Core

Question Text:

^USEHRAID_C ^SCNAME have difficulty hearing sounds like people's voices or music? Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe_C cannot do this at all?

Fills:

USEHRAID_C	Description	When using ^hisher_C hearing aid(s) does/Does
	Instruction	If HEARAID_C=1 fill "When using ^hisher_C hearing aid(s) does " else fill "Does "
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1-4,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0010.00.1 Variable: EQUIP_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME use any equipment or receive assistance for walking?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

```
<1> if GEN.AGE_FINAL[PX_C]=2-4 [goto NOEQWLKDF_C]
else if GEN.AGE_FINAL[PX_C] ge 5 [goto NOEQWLK100_C]
<2,RF,DK> if GEN.AGE_FINAL[PX_C]=2-4 [goto WLKDF_C]
else if GEN.AGE_FINAL[PX_C] ge 5 [goto WLK100_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0020.00.1 Variable: NOEQWLKDF_C Interview Module: Child Content Type: Annual Core

Question Text:

Without using ^hisher_C equipment or assistance, does ^SCNAME have difficulty walking? Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe_C cannot do this at all?

Fills:

hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 2-4 who use equipment or assistance for walking

Skip Instructions:

<1-4,RF,DK> [goto EQWLKDF_C]

2025 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0030.00.1 Variable: EQWLKDF_C Interview Module: Child Content Type: Annual Core

Question Text:

When using ^hisher_C equipment or assistance, does ^SCNAME have difficulty walking?

***Read if necessary:** Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe_C cannot do this at all?

Fills:

hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 2-4 who use equipment or assistance for walking

Skip Instructions:

<1-4,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0040.00.1 Variable: WLKDF_C Interview Module: Child Content Type: Annual Core

Question Text:

Compared with children of the same age, does ^SCNAME have difficulty walking? Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe_C cannot do this at all?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 2-4 who do not use equipment or assistance for walking or Refused or Don't Know

Skip Instructions:

<1-4,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0050.00.1 Variable: NOEQWLK100_C Interview Module: Child Content Type: Annual Core

Question Text:

WITHOUT USING ^hisher_C equipment or assistance, does ^SCNAME have difficulty walking 100 yards on level ground? That would be about the length of 1 football field or 1 city block. Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe_C cannot do this at all?

Fills:

hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17 who use equipment or assistance for walking

Skip Instructions:

<1-3,RF,DK> [goto NOEQWLK13M_C]
<4> [goto EQWLK100_C]

2025 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0060.00.1 Variable: NOEQWLK13M_C Interview Module: Child Content Type: Annual Core

Question Text:

WITHOUT USING ^hisher_C equipment or assistance, does ^SCNAME have difficulty walking a third of a mile on level ground? That would be about the length of 5 football fields or 5 city blocks.

**Read if necessary: Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe_C cannot do this at all?*

Fills:

hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17 who use equipment or assistance for walking and have no, some or a lot difficulty walking 100 yards when not using their equipment/assistance or Refused or Don't Know

Skip Instructions:

<1-4,RF,DK> [goto EQWLK100_C]

2025 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0070.00.1 Variable: EQWLK100_C Interview Module: Child Content Type: Annual Core

Question Text:

WHEN USING ^hisher_C equipment or assistance, does ^SCNAME have difficulty walking 100 yards on level ground? That would be about the length of 1 football field or 1 city block.

**Read if necessary: Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe_C cannot do this at all?*

Fills:

hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17 who use equipment or assistance for walking.

Skip Instructions:

<1-3,RF,DK> [goto EQWLK13M_C]
<4> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0080.00.1 Variable: EQWLK13M_C Interview Module: Child Content Type: Annual Core

Question Text:

WHEN USING ^hisher_C equipment or assistance, does ^SCNAME have difficulty walking a third of a mile on level ground? That would be about the length of 5 football fields or 5 city blocks.

**Read if necessary: Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe_C cannot do this at all?*

Fills:

hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17 who use equipment or assistance for walking and have no, some or a lot of difficulty walking 100 yards when using their equipment/assistance or Refused or Don't Know

Skip Instructions:

<1-4,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0090.00.1 Variable: WLK100_C Interview Module: Child Content Type: Annual Core

Question Text:

Compared with children of the same age, does ^SCNAME have difficulty walking 100 yards on level ground? That would be about the length of 1 football field or 1 city block. Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe_C cannot do this at all?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17 who do not use equipment or assistance for walking or Refused or Don't Know

Skip Instructions:

<1-3,RF,DK> [goto WLK13M_C]
<4> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

MOB: Mobility

Question ID: MOB.0100.00.1 Variable: WLK13M_C Interview Module: Child Content Type: Annual Core

Question Text:

Compared with children of the same age, does ^SCNAME have difficulty walking a third of a mile on level ground? That would be about the length of 5 football fields or 5 city blocks.

***Read if necessary:** *Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe_C cannot do this at all?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17 who do not use equipment or assistance for walking and have no difficulty, some difficulty, or a lot of difficulty walking 100 yards or Refused or Don't Know

Skip Instructions:

<1-4,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

UPP: Upper Body, Motor skills and self care

Question ID: UPP.0010.00.1 Variable: PICKUPPDF_C Interview Module: Child Content Type: Annual Core

Question Text:

Compared with children of the same age, does ^SCNAME have difficulty picking up small objects with ^hisher_C hands?

**Read if necessary: Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe_C cannot do this at all?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 2-4

Skip Instructions:

<1-4,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

UPP: Upper Body, Motor skills and self care

Question ID: UPP.0020.00.1 Variable: SELF CARE_DF_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME have difficulty with self care, such as eating or dressing?

***Read if necessary:** Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe_C cannot do this at all?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17

Skip Instructions:

<1-4,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

COM: Communication

Question ID: COM.0010.00.1 Variable: UNDRSTYOU_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME have difficulty understanding you?

***Read if necessary:** Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe_C cannot do this at all?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 2-4

Skip Instructions:

<1-4,RF,DK> [goto UNDRSTCHD_C]

2025 National Health Interview Survey (NHIS) Questionnaire

COM: Communication

Question ID: COM.0020.00.1 Variable: UNDRSTCHD_C Interview Module: Child Content Type: Annual Core

Question Text:

When ^SCNAME speaks, do you have difficulty understanding ^himherthem_C?

***Read if necessary:** Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe_C cannot do this at all?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
himherthem_C	Description	him/her/them
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "him"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "them"
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 2-4

Skip Instructions:

<1-4,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

COM: Communication

Question ID: COM.0030.00.1 Variable: UNDRSTIHH_C Interview Module: Child Content Type: Annual Core

Question Text:

When ^SCNAME speaks, ^doesheshedothey_C have difficulty being understood by people inside of this household?

**Read if necessary: Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe_C cannot do this at all?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
doesheshedothey_C	Description	does he/does she/do they
	Instruction	If SEX=1 fill: "does he" If SEX=2 fill: "does she" If SEX IN ('RF','DK') fill: "do they"
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17

Skip Instructions:

<1-4,RF,DK> [goto UNDRSTOHH_C]

2025 National Health Interview Survey (NHIS) Questionnaire

COM: Communication

Question ID: COM.0040.00.1 Variable: UNDRSTOHH_C Interview Module: Child Content Type: Annual Core

Question Text:

When ^SCNAME speaks, ^doesheshedothey_C have difficulty being understood by people outside of this household?

**Read if necessary: Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe_C cannot do this at all?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
doesheshedothey_C	Description	does he/does she/do they
	Instruction	If SEX=1 fill: "does he" If SEX=2 fill: "does she" If SEX IN ('RF','DK') fill: "do they"
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17

Skip Instructions:

<1-4,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

COG: Cognition

Question ID: COG.0010.00.1 Variable: LEARNDF_C Interview Module: Child Content Type: Annual Core

Question Text:

Compared with children of the same age, does ^SCNAME have difficulty learning things?

***Read if necessary:** Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe_C cannot do this at all?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1-4,RF,DK> [goto REMEMBERDF_C]

2025 National Health Interview Survey (NHIS) Questionnaire

COG: Cognition

Question ID: COG.0020.00.1 Variable: REMEMBERDF_C Interview Module: Child Content Type: Annual Core

Question Text:

Compared with children of the same age, does ^SCNAME have difficulty remembering things?

***Read if necessary:** *Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe_C cannot do this at all?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17

Skip Instructions:

<1-4,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

ANX: Anxiety

Question ID: ANX.0010.00.1 Variable: ANXFREQ_C Interview Module: Child Content Type: Annual Core

Question Text:

How often does ^SCNAME seem very anxious, nervous, or worried? Would you say: daily, weekly, monthly, a few times a year, or never?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Daily
2	Weekly
3	Monthly
4	A few times a year
5	Never
7	Refused
9	Don't Know

Universe:

Sample Children 5-17

Skip Instructions:

<1-5,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

DEP: Depression

Question ID: DEP.0010.00.1 Variable: DEPFREQ_C Interview Module: Child Content Type: Annual Core

Question Text:

How often does ^SCNAME seem very sad or depressed? Would you say: daily, weekly, monthly, a few times a year, or never?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Daily
2	Weekly
3	Monthly
4	A few times a year
5	Never
7	Refused
9	Don't Know

Universe:

Sample Children 5-17

Skip Instructions:

<1-5,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

BEH: Behavior

Question ID: BEH.0010.00.1 Variable: BEHDFPLYG_C Interview Module: Child Content Type: Annual Core

Question Text:

Compared with children of the same age, does ^SCNAME have difficulty playing? Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe_C cannot do this at all?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 2-4

Skip Instructions:

<1-4,RF,DK> [goto BEHKBHYG_C]

2025 National Health Interview Survey (NHIS) Questionnaire

BEH: Behavior

Question ID: BEH.0020.00.1 Variable: BEHKBHYG_C Interview Module: Child Content Type: Annual Core

Question Text:

Compared with children of the same age, how much does ^SCNAME kick, bite, or hit other children or adults? Would you say: not at all, the same or less, more, or a lot more?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	The same or less
3	More
4	A lot more
7	Refused
9	Don't Know

Universe:

Sample Children 2-4

Skip Instructions:

<1-4,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

BEH: Behavior

Question ID: BEH.0030.00.1 Variable: BEHDFCNTR_C Interview Module: Child Content Type: Annual Core

Question Text:

Compared with children of the same age, does ^SCNAME have difficulty controlling ^hisher_C behavior?

**Read if necessary: Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe_C cannot do this at all?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17

Skip Instructions:

<1-4,RF,DK> [goto BEHDFPCS_C]

2025 National Health Interview Survey (NHIS) Questionnaire

BEH: Behavior

Question ID: BEH.0040.00.1 Variable: BEHDFCS_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME have difficulty concentrating on an activity that ^heshe_C enjoy^s doing?

**Read if necessary: Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe_C cannot do this at all?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"
s	Description	s
	Instruction	if SEX_FINAL[PX_C]=1,2 fill "s" else fill blank

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17

Skip Instructions:

<1-4,RF,DK> [goto BEHDFCHG_C]

2025 National Health Interview Survey (NHIS) Questionnaire

BEH: Behavior

Question ID: BEH.0050.00.1 Variable: BEHDFCHG_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME have difficulty accepting changes in ^hisher_C routine?

***Read if necessary:** Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe_C cannot do this at all?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17

Skip Instructions:

<1-4,RF,DK> [goto BEHDFMKFR_C]

2025 National Health Interview Survey (NHIS) Questionnaire

BEH: Behavior

Question ID: BEH.0060.00.1 Variable: BEHDFMKFR_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME have difficulty making friends?

***Read if necessary:** *Would you say ^SCNAME has: no difficulty, some difficulty, a lot of difficulty, or ^heshe_C cannot do this at all?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	No difficulty
2	Some difficulty
3	A lot of difficulty
4	Cannot do at all
7	Refused
9	Don't Know

Universe:

Sample Children 5-17

Skip Instructions:

<1-4,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

BSC: Baby Pediatric Symptom Checklist

Question ID: BSC.0010.00.1 Variable: BSCINTRO_C Interview Module: Child Content Type: Annual Core

Question Text:

- * The following statements are not to be read to the respondent. They are displayed and included here for legal reasons.
- * The Baby Pediatric Symptom Checklist is part of the larger Survey of Well-being of Young Children, copyrighted by Tufts Medical Center. For more information go to <https://www.floatinghospital.org/The-Survey-of-Wellbeing-of-Young-Children/Overview.aspx>
- * Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Children under 2 years

Skip Instructions:

<1> [goto BSCNWPPL_C]

2025 National Health Interview Survey (NHIS) Questionnaire

BSC: Baby Pediatric Symptom Checklist

Question ID: BSC.0020.00.1 Variable: BSCNWPPL_C Interview Module: Child Content Type: Annual Core

Question Text:

These next questions are about ^SCNAME's behavior. Think about what you would expect of other children the same age, and tell me how much each statement applies to ^SCNAME.

Does ^SCNAME have a hard time being with new people? Would you say not at all, somewhat, or very much?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Somewhat
3	Very much
7	Refused
9	Don't Know

Universe:

Sample Children with Age under 2 years

Skip Instructions:

<1-3,RF,DK> [goto BSCNWPLCS_C]

2025 National Health Interview Survey (NHIS) Questionnaire

BSC: Baby Pediatric Symptom Checklist

Question ID: BSC.0030.00.1 Variable: BSCNWPLCS_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME have a hard time in new places? Would you say not at all, somewhat, or very much?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Somewhat
3	Very much
7	Refused
9	Don't Know

Universe:

Sample Children with Age under 2 years

Skip Instructions:

<1-3,RF,DK> [goto BSCCHG_C]

2025 National Health Interview Survey (NHIS) Questionnaire

BSC: Baby Pediatric Symptom Checklist

Question ID: BSC.0040.00.1 Variable: BSCCHG_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME have a hard time with change?

* **Read if necessary:** *Would you say not at all, somewhat, or very much?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Somewhat
3	Very much
7	Refused
9	Don't Know

Universe:

Sample Children with Age under 2 years

Skip Instructions:

<1-3,RF,DK> [goto BSCHLOPPL_C]

2025 National Health Interview Survey (NHIS) Questionnaire

BSC: Baby Pediatric Symptom Checklist

Question ID: BSC.0050.00.1 Variable: BSCHLOPPL_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME mind being held by other people?

* **Read if necessary:** *Would you say not at all, somewhat, or very much?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Somewhat
3	Very much
7	Refused
9	Don't Know

Universe:

Sample Children with Age under 2 years

Skip Instructions:

<1-3,RF,DK> [goto BSCCRYALT_C]

2025 National Health Interview Survey (NHIS) Questionnaire

BSC: Baby Pediatric Symptom Checklist

Question ID: BSC.0060.00.1 Variable: BSCCRYALT_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME cry a lot?

* **Read if necessary:** *Would you say not at all, somewhat, or very much?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Somewhat
3	Very much
7	Refused
9	Don't Know

Universe:

Sample Children with Age under 2 years

Skip Instructions:

<1-3,RF,DK> [goto BSCCLMDWN_C]

2025 National Health Interview Survey (NHIS) Questionnaire

BSC: Baby Pediatric Symptom Checklist

Question ID: BSC.0070.00.1 Variable: BSCCLMDWN_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME have a hard time calming down?

* **Read if necessary:** *Would you say not at all, somewhat, or very much?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Somewhat
3	Very much
7	Refused
9	Don't Know

Universe:

Sample Children with Age under 2 years

Skip Instructions:

<1-3,RF,DK> [goto BSCFUSSY_C]

2025 National Health Interview Survey (NHIS) Questionnaire

BSC: Baby Pediatric Symptom Checklist

Question ID: BSC.0080.00.1 Variable: BSCFUSSY_C Interview Module: Child Content Type: Annual Core

Question Text:

Is ^SCNAME fussy or irritable?

* **Read if necessary:** *Would you say not at all, somewhat, or very much?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Somewhat
3	Very much
7	Refused
9	Don't Know

Universe:

Sample Children with Age under 2 years

Skip Instructions:

<1-3,RF,DK> [goto BSCSTHE_C]

2025 National Health Interview Survey (NHIS) Questionnaire

BSC: Baby Pediatric Symptom Checklist

Question ID: BSC.0090.00.1 Variable: BSCSTHE_C Interview Module: Child Content Type: Annual Core

Question Text:

Is it hard to comfort ^SCNAME?

* **Read if necessary:** *Would you say not at all, somewhat, or very much?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Somewhat
3	Very much
7	Refused
9	Don't Know

Universe:

Sample Children with Age under 2 years

Skip Instructions:

<1-3,RF,DK> [goto BSCSCHD_C]

2025 National Health Interview Survey (NHIS) Questionnaire

BSC: Baby Pediatric Symptom Checklist

Question ID: BSC.0100.00.1 Variable: BSCSCHD_C Interview Module: Child Content Type: Annual Core

Question Text:

Is it hard to keep ^SCNAME on a schedule or routine?

* **Read if necessary:** *Would you say not at all, somewhat, or very much?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Somewhat
3	Very much
7	Refused
9	Don't Know

Universe:

Sample Children with Age under 2 years

Skip Instructions:

<1-3,RF,DK> [goto BSCPTSLP_C]

2025 National Health Interview Survey (NHIS) Questionnaire

BSC: Baby Pediatric Symptom Checklist

Question ID: BSC.0110.00.1 Variable: BSCPTSLP_C Interview Module: Child Content Type: Annual Core

Question Text:

Is it hard to put ^SCNAME to sleep?

* **Read if necessary:** *Would you say not at all, somewhat, or very much?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Somewhat
3	Very much
7	Refused
9	Don't Know

Universe:

Sample Children with Age under 2 years

Skip Instructions:

<1-3,RF,DK> [goto BSCSTYSLP_C]

2025 National Health Interview Survey (NHIS) Questionnaire

BSC: Baby Pediatric Symptom Checklist

Question ID: BSC.0120.00.1 Variable: BSCSTYSLP_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME have trouble staying asleep?

* **Read if necessary:** *Would you say not at all, somewhat, or very much?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Somewhat
3	Very much
7	Refused
9	Don't Know

Universe:

Sample Children with Age under 2 years

Skip Instructions:

<1-3,RF,DK> [goto BSCPRLKSL_C]

2025 National Health Interview Survey (NHIS) Questionnaire

BSC: Baby Pediatric Symptom Checklist

Question ID: BSC.0130.00.1 Variable: BSCPRLKSL_C Interview Module: Child Content Type: Annual Core

Question Text:

Is it hard for ^youmembersoffamily to get enough sleep because of ^SCNAME?

* **Read if necessary:** *Would you say not at all, somewhat, or very much?*

Fills:

youmembersoffamily	Description	you/members of your family
	Instruction	If PCNT='2' fill "you" else fill "members of your family"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Somewhat
3	Very much
7	Refused
9	Don't Know

Universe:

Sample Children with Age under 2 years

Skip Instructions:

<1-3,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

SCH: Schooling

Question ID: SCH.0010.00.1 Variable: SCHDYSMSS_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, about how many days of school did ^SCNAME miss because ^HeShe_C had an illness, injury, or disability?

* Enter '996' if child did not go to school in the past 12 months.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
HeShe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

000-365	Range of values
996	No school in past 12 months
997	Refused
999	Don't Know

Universe:

Sample Children 5-17

Skip Instructions:

<0-99,996,RF,DK> [goto SCHSPEDEV_C]
<100-365> [goto ERR1_SCHDYSMSS_C]
<366-995> [goto ERR2_SCHDYSMSS_C]

Hard Edit:

Check Text	Check Description	Check Text
ERR2_SCHDYSMSS_C	hard check for days of missed school	{check ERR2_SCHDYSMSS_C} "366-995" days not allowed in this field.

Soft Edit:

Check Text	Check Description	Check Text
ERR1_SCHDYSMSS_C	soft edit for 100-365 days of missed school	{signal ERR1_SCHDYSMSS_C} ^SCHDYSMSS_C is an unusually large number, did ^SCNAME miss ^SCHDYSMSS_C days of school because of illness, injury, or disability? Please verify.

2025 National Health Interview Survey (NHIS) Questionnaire

SCH: Schooling

Question ID: SCH.0020.00.1 Variable: SCHSPEDEV_C Interview Module: Child Content Type: Annual Core

Question Text:

Has ^SCNAME ever had a special education or early intervention plan, such as an Individualized Education Plan, an IEP, or an Individualized Family Service Plan, an IFSP?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto SCHSPED_C]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

SCH: Schooling

Question ID: SCH.0030.00.1 Variable: SCHSPED_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME currently have a special education or early intervention plan?

***Read if necessary:** Consider special education or early intervention plans received during the past school year.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who ever had a special education or early intervention plan

Skip Instructions:

<1> [goto SCHSPEDEM_C]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

SCH: Schooling

Question ID: SCH.0040.00.1 Variable: SCHSPEDEM_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^SCNAME receive these services to help with ^hisher_C emotions, concentration, behavior, or mental health?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who currently have a special education or early intervention plan

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0010.00.1 Variable: HICOV_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

The next questions are about health insurance. Include health insurance obtained through employment or purchased directly as well as government programs like Medicare, Medicaid, and the Children's Health Insurance Program that provide medical care or help pay medical bills. Is ^SCNAME covered by any kind of health insurance or some other kind of health care plan?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,R,D> [goto HIKIND_C]
<2> [goto MCAIDPRB_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0020.00.1 Variable: HIKIND_C Interview Module: Child Content Type: Annual Core

Question Text:

[F1]

What kinds of health insurance or health care coverage does ^SCNAME have? Is it...Private health insurance, Medicare, Medicare supplement, Medicaid, Children's Health Insurance Program or CHIP, military related health care including TRICARE, CHAMPUS, VA health care and CHAMP-VA, Indian Health Service, state-sponsored health plan, or an other government program?

* Enter all that apply, separate with commas.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

01	Private health insurance
02	Medicare
03	Medigap
04	Medicaid
05	Children's Health Insurance Program (CHIP)
06	Military related health care: TRICARE (CHAMPUS) / VA health care / CHAMP-VA
07	Indian Health Service
08	State-sponsored health plan
09	Other government program
10	No coverage of any type
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 covered by any kind of health insurance or health care coverage or refused/don't know if they have insurance or health care coverage.

Skip Instructions:

if > 1 answer selected and (<10> in HIKIND_C) [goto ERR1_HIKIND_C]
 else if HIKIND_C=RF,DK or (<10> in HIKIND_C) [goto MCAIDPRB_C]
 else [goto SINCOVDE_C]

Hard Edit:

Check Text	Check Description	Check Text
ERR1_HIKIND_C	Selecting no coverage and other categories hard edit	{check ERR1_HIKIND_C} Cannot mark "no coverage of any kind" and another type. Please correct.

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0030.00.1 Variable: MCAIDPRB_C Interview Module: Child Content Type: Annual Core

Question Text:

[F1]

There is a program called Medicaid that pays for health care for persons in need. ^STATEMA Is ^SCNAME covered by Medicaid?

Fills:

STATEMA	Description	In ^STATENAME it is also called ^STMEDICAID.
	Instruction	if STMEDICAID ne empty, fill: "In ^STATENAME it is also called ^STMEDICAID." else fill: blank
STATENAME	Description	State name
	Instruction	If ST=AL, fill: Alabama else if ST=AK, fill: Alaska else if ST=AR, fill: Arkansas else if ST=AZ, fill: Arizona else if ST=CA, fill: California else if ST=CO, fill: Colorado else if ST=CT, fill: Connecticut else if ST=DE, fill: Delaware else if ST=DC, fill: District of Columbia else if ST=FL, fill: Florida else if ST=GA, fill: Georgia else if ST=HI, fill: Hawaii else if ST=ID, fill: Idaho else if ST=IL, fill: Illinois else if ST=IN, fill: Indiana else if ST=IA, fill: Iowa else if ST=KS, fill: Kansas else if ST=KY, fill: Kentucky else if ST=LA, fill: Louisiana else if ST=ME, fill: Maine else if ST=MD, fill: Maryland else if ST=MA, fill: Massachusetts else if ST=MI, fill: Michigan else if ST=MN, fill: Minnesota else if ST=MS, fill: Mississippi else if ST=MO, fill: Missouri else if ST=MT, fill: Montana else if ST=NE, fill: Nebraska else if ST=NV, fill: Nevada else if ST=NH, fill: New Hampshire else if ST=NJ, fill: New Jersey else if ST=NM, fill: New Mexico else if ST=NY, fill: New York else if ST=NC, fill: North Carolina else if ST=ND, fill: North Dakota else if ST=OH, fill: Ohio else if ST=OK, fill: Oklahoma else if ST=OR, fill: Oregon else if ST=PA, fill: Pennsylvania else if ST=RI, fill: Rhode Island else if ST=SC, fill: South Carolina else if ST=SD, fill: South Dakota else if ST=TN, fill: Tennessee else if ST=TX, fill: Texas else if ST=UT, fill: Utah else if ST=VT, fill: Vermont else if ST=VA, fill: Virginia else if ST=WA, fill: Washington else if ST=WV, fill: West Virginia else if ST=WI, fill: Wisconsin else if ST=WY, fill: Wyoming
STMEDICAID	Description	State Medicaid name

	Instruction	If AL then fill "Alabama Coordinated Health Network (ACHN)" If AK then fill "Denali KidCare" If AZ then fill "Arizona Health Care Cost Containment System (AHCCCS)" If AR then fill "ARKidsFirst; ARHOME; Provider-Led Arkansas Shared Savings Entity (PASSE)" If CA then fill "Medi-Cal" If CO then fill "Health First Colorado" If CT then fill "HUSKY Health" If DC then fill "DC Medicaid; DC Healthy Families" If DE then fill "Diamond State Health Plan (DSHP)" If FL then fill "FL Statewide Medicaid Managed Care (SMMC)" If GA then fill "Peach State Health Plan (Peach State); Georgia Families" If HI then fill "Med-QUEST; QUEST Integration" If ID then fill "Healthy Connections" If IL then fill "Medical Assistance; Family Care; HealthChoice Illinois" If IN then fill "Healthy Indiana Plan (HIP); Hoosier Healthwise; Hoosier Care Connect" If IA then fill "IA Health Link; Iowa Health and Wellness Plan (IHAWP)" If KS then fill "KanCare; Kansas Medical Assistance Program (KMAP); OneCare Kansas" If KY then fill "Kentucky Medicaid; KYHealth card" If LA then fill "Healthy Louisiana" If ME then fill "MaineCare" If MD then fill "HealthChoice" If MA then fill "MassHealth" If MI then fill "Healthy Michigan Plan (HMP)" If MN then fill "Medical Assistance (MA)" If MS then fill "MississippiCAN" If MO then fill "MO Healthnet" If MT then fill "Montana Medicaid; Healthy Montana Kids Plus (HMK Plus)" If NC then fill "NC Medicaid Managed Care; Children and Families Specialty Plan" If ND then fill "North Dakota (ND) Medicaid" If NE then fill "Heritage Health" If NH then fill "NH Medicaid; Medical Assistance Program" If NJ then fill "NJ Family Care" If NM then fill "Centennial Care" If NV then fill "Nevada Medicaid (NVMedicaid)" If NY then fill "New York Medicaid Choice" If OH then fill "Next Generation Program" If OK then fill "SoonerCare; SoonerSelect" If OR then fill "Oregon Health Plan (OHP)" If PA then fill "Medical Assistance (MA); HealthChoices" If RI then fill "RIte Care" If SC then fill "Healthy Connections" If SD then fill "South Dakota Medicaid Assistance" If TN then fill "TennCare" If TX then fill "State of Texas Access Reform (STAR); STAR +PLUS; STAR Kids" If UT then fill "Utah Medicaid; Utah Medicaid Integrated Care (UMIC)" If VT then fill "Green Mountain Care (Vermont Medicaid); Dr. Dynasaur" If VA then fill "Virginia Cardinal Care" If WA then fill "Apple Health" If WV then fill "West Virginia State Medicaid Plan; Mountain Health Trust (MHT)" If WI then fill "ForwardHealth; BadgerCare Plus" If WY then fill "Wyoming Medicaid State Plan; WYhealth"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who have indicated they are uninsured, refused, or don't know if they are insured

Skip Instructions:

<1,2,RF,DK> [goto SINCOVDE_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0040.00.1 **Variable:** SINCOVDE_C **Interview Module:** Child **Content Type:** Annual Core

Question Text:

?[F1]

^INADDITIONIS ^SCNAME covered by a SEPARATE plan that only pays for dental services?

Fills:

INADDITIONIS	Description	In addition to ^HITYPECNOSS, is/Is
	Instruction	If (HIKIND_C=1-9 or MCAIDPRB_C=1), fill "In addition to ^HITYPECNOSS, is" else fill "Is"
HITYPECNOSS	Description	Type of health care plans without single service plans
	Instruction	fill coverage types from HIKIND_C, except HIKIND_C=10, HIKIND_C=1 fill: "private health insurance" HIKIND_C=2 fill: "Medicare" HIKIND_C=3 fill: "Medicare Supplement or Medigap" HIKIND_C=4 fill: "Medicaid" HIKIND_C=5 fill: "Children's Health Insurance Program (CHIP)" HIKIND_C=6 fill: "military related health care" HIKIND_C=7 fill: "Indian Health Service" HIKIND_C=8 fill: "a state-sponsored health plan" HIKIND_C=9 fill: "an other government program" if MCAIDPRB_C=1, fill "Medicaid" separate choices with a comma and seperate the last two choices with "and"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,2,RF,DK> [goto SINCOVVS_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0050.00.1 Variable: SINCOVVS_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Is ^SCNAME covered by a SEPARATE plan that only pays for vision services?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,2,RF,DK> [goto SINCOVRX_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0060.00.1 Variable: SINCOVRX_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Is ^SCNAME covered by a SEPARATE plan that only pays for prescriptions?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,2,RF,DK> [goto HICHANGE_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0070.00.1 Variable: HICHANGE_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

I have recorded ^SCNAME is ^COVEREDC. Is this correct?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
COVEREDC	Description	not covered by health insurance/covered by ^HITYPEC
	Instruction	if HIKIND_C=10,R,D and MCAIDPRB_C=2,R,D and SINCOVDE_C=2,R,D and SINCOVVS_C=2,R,D and SINCOVRX_C=2,R,D fill: "not covered by health insurance" else fill: "covered by ^HITYPEC"
HITYPEC	Description	Type of health care plans with single service plans
	Instruction	fill coverage types from HIKIND_C, except HIKIND_C=10, HIKIND_C=1 fill: "private health insurance" HIKIND_C=2 fill: "Medicare" HIKIND_C=3 fill: "Medicare Supplement or Medigap" HIKIND_C=4 fill: "Medicaid" HIKIND_C=5 fill: "Children's Health Insurance Program (CHIP)" HIKIND_C=6 fill: "military related health care" HIKIND_C=7 fill: "Indian Health Service" HIKIND_C=8 fill: "a state-sponsored health plan" HIKIND_C=9 fill: "an other government program" if MCAIDPRB_C=1, fill "Medicaid" If SINCOVDE_C=1 and SINCOVRX_C=2,RF,DK and SINCOVVS_C=2,RF,DK, fill: "a single service dental plan" If SINCOVDE_C=2,RF,DK and SINCOVRX_C=1 and SINCOVVS_C=2,RF,DK, fill: "a single service prescription plan" If SINCOVDE_C=2,RF,DK and SINCOVRX_C=2,RF,DK and SINCOVVS_C=1, fill: "a single service vision plan" If SINCOVDE_C=1 and SINCOVRX_C=1 and SINCOVVS_C=2,RF,DK, fill: "single service dental and prescription plans" If SINCOVDE_C=1 and SINCOVRX_C=2,RF,DK and SINCOVVS_C=1, fill: "single service dental and vision plans" If SINCOVDE_C=2,RF,DK and SINCOVRX_C=1 and SINCOVVS_C=1, fill: "single service vision and prescription plans" If SINCOVDE_C=1 and SINCOVRX_C=1 and SINCOVVS_C=1, fill: "single service dental, vision, and prescription plans" separate choices with a comma and separate the last two choices with "and"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

```
<1,RF,DK>
if 2 in HIKIND_C [goto MCPART_C]
else if 4 in HIKIND_C or MCAIDPRB_C=1[goto MACHMN_C]
else if 1 in HIKIND_C [goto SET_INSPRI_FLAG]
else if 3 in HIKIND_C [goto SET_INSPRI_FLAG]
else if 5 in HIKIND_C [goto CHNAME_C]
else if 8 in HIKIND_C [goto OPNAME_C]
else if 9 in HIKIND_C [goto OGNAME_C]
else if 6 in HIKIND_C [goto MILSPC_C]
else if 7 in HIKIND_C [goto HINOTYR_C]
else if 10 in HIKIND_C and MCAIDPRB_C IN (2,RF,DK) [goto HILAST_C]
else [goto FINISH_C]
<2> [goto ERR1_HICHANGE_C]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR1_HICHANGE_C		{check ERR1_HICHANGE_C}
		Press enter to go back to HIKIND_C and update coverage.

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0080.00.1 **Variable:** MCPART_C **Interview Module:** Child **Content Type:** Annual Core

Question Text:

?[F1]

What type of Medicare coverage does ^SCNAME have? Is it Part A - hospital insurance, Part B - medical insurance, or both?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Part A- hospital only
2	Part B- medical only
3	Both Part A and Part B
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with Medicare

Skip Instructions:

<2,3,RF,DK> [goto MCCHOICE_C] <1> [goto MCPARTD_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0090.00.1 Variable: MCCHOICE_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Is ^SCNAME enrolled in a Medicare Advantage plan?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with Medicare part B only or both parts A and B

Skip Instructions:

<1,2,RF,DK> [goto MCHMO_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0100.00.1 Variable: MCHMO_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Is ^SCNAME under a Medicare managed care arrangement, such as an HMO, that is, a Health Maintenance Organization?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with Medicare part B only or both parts A and B

Skip Instructions:

```
<1> [goto MCANAME_C]
<2,RF,DK> if MCCHOICE_C=1 [goto MCANAME_C]
      else if MCCHOICE_C=2,RF,DK, [goto MCPARTD_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0110.00.1 Variable: MCANAME_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

What is the name of ^SCNAME's Medicare Advantage or Medicare HMO plan?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 with a Medicare Advantage plan or a Medicare managed care arrangement

Skip Instructions:

<verbatim, RF, DK> [goto MCDNCOV_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0111.00.1 Variable: MCDNCOV_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Does ^MEDADVNAME_C pay for any of the costs for dental care?

Fills:

MEDADVNAME_C	Description	{Value of MCANAME_C}/this Medicare Advantage or Medicare HMO plan
	Instruction	If MCANAME_C has value, fill value of MCANAME_C If MCANAME_C is DK/RF, fill: "this Medicare Advantage or Medicare HMO plan"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with a Medicare Advantage plan or a Medicare managed care arrangement

Skip Instructions:

<1,2,RF,DK> [goto MCVSCOV_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0112.00.1 Variable: MCVSCOV_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Does ^MEDADVNAME_C pay for any of the costs for routine vision care, such as glasses and contact lenses?

Fills:

MEDADVNAME_C	Description	{Value of MCANAME_C}/this Medicare Advantage or Medicare HMO plan
	Instruction	If MCANAME_C has value, fill value of MCANAME_C If MCANAME_C is DK/RF, fill: "this Medicare Advantage or Medicare HMO plan"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with a Medicare Advantage plan or a Medicare managed care arrangement

Skip Instructions:

<1,2,RF,DK> [goto MCPARTD_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0120.00.1 Variable: MCPARTD_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Is ^SCNAME enrolled in Medicare Part D, also known as the Medicare Prescription Drug Plan?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with Medicare

Skip Instructions:

```
<1,2,RF,DK>
if 4 in HIKIND_C or MCAIDPRB_C=1[goto MACHMN_C]
else if 1 in HIKIND_C [goto SET_INSPRI_FLAG]
else if 3 in HIKIND_C [goto SET_INSPRI_FLAG]
else if 5 in HIKIND_C [goto CHNAME_C]
else if 8 in HIKIND_C [goto OPNAME_C]
else if 9 in HIKIND_C [goto OGNAME_C]
else if 6 in HIKIND_C [goto MILSPC_C]
else [goto HINOTYR_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0130.00.1 Variable: MACHMN_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

The next questions are about Medicaid coverage. What is the name of ^SCNAME's Medicaid health plan?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 with Medicaid coverage

Skip Instructions:

<allow 80, RF, DK> [goto MAXCHNG_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0140.00.1 Variable: MAXCHNG_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Was ^SCNAME's Medicaid obtained through Healthcare.gov or the ^MARKETPLACE?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
MARKETPLACE	Description	Health Insurance marketplace names
	Instruction	If no state specified below, fill "Health Insurance Marketplace" If state specified below fill: If CA then fill "Health Insurance Marketplace, such as Covered California" If CO then fill "Health Insurance Marketplace, such as Connect for Health Colorado" If CT then fill "Health Insurance Marketplace, such as Access Health CT" If DC then fill "Health Insurance Marketplace, such as DC Health Link" If ID then fill "Health Insurance Marketplace, such as Your Health Idaho" If KY then fill "Health Insurance Marketplace, such as Kynect" If MA then fill "Health Insurance Marketplace, such as Massachusetts Health Connector" If ME then fill "Health Insurance Marketplace, such as CoverME" If MD then fill "Health Insurance Marketplace, such as Maryland Health Connection" If MN then fill "Health Insurance Marketplace, such as MNSure" If NJ then fill "Health Insurance Marketplace, such as GetCoveredNJ" If NV then fill "Health Insurance Marketplace, such as Nevada Health Link" If NM then fill "Health Insurance Marketplace, such as beWellnm" If NY then fill "Health Insurance Marketplace, such as NY State of Health" If PA then fill "Health Insurance Marketplace, such as Pennie" If RI then fill "Health Insurance Marketplace, such as HealthSource RI" If VA then fill "Health Insurance Marketplace, such as Virginia's Insurance Marketplace" If VT then fill "Health Insurance Marketplace, such as Vermont Health Connect" If WA then fill "Health Insurance Marketplace, such as Washington Healthplanfinder"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with Medicaid coverage

Skip Instructions:

<1,2,RF,DK> [goto MAPREM_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0150.00.1 Variable: MAPREM_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

A health insurance premium is the amount ^SCNAME or a family member pays each month for health care coverage. Does ^SCNAME or a family member pay a premium for this Medicaid plan?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with Medicaid coverage

Skip Instructions:

<1,2,RF,DK> [goto MADEDUC_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0160.00.1 Variable: MADEDUC_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

A deductible is the amount you have to pay for health care before your health insurance or health coverage plan will start paying your medical bills. Does ^SCNAME's Medicaid plan have an annual deductible?

* **Read if necessary:** *A deductible is different from a copay (copayment).*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with Medicaid coverage

Skip Instructions:

```
<1> [goto MAHDHP_C]
<2,RF,DK>
if 1 in HIKIND_C [goto SET_INSPRI_FLAG]
else if 3 in HIKIND_C [goto SET_INSPRI_FLAG]
else if 5 in HIKIND_C [goto CHNAME_C]
else if 8 in HIKIND_C [goto OPNAME_C]
else if 9 in HIKIND_C [goto OGNAME_C]
else if 6 in HIKIND_C [goto MILSPC_C]
else [goto HINOTYR_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0170.00.1 Variable: MAHDHP_C Interview Module: Child Content Type: Annual Core

Question Text:

[F1]

Is the annual deductible for medical care for this plan less than ^HDHPDED or ^HDHPDED or more?
If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.

Fills:

HDHPDED	Description	Deductible threshold (may change in future year)
	Instruction	Fill: \$1,650

Response:

1	Deductible is less than \$1,600
2	Deductible is \$1,600 or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with Medicaid coverage who have a deductible

Skip Instructions:

```
<1,2,RF,DK>
if 1 in HIKIND_C [goto SET_INSPRI_FLAG]
else if 3 in HIKIND_C [goto SET_INSPRI_FLAG]
else if 5 in HIKIND_C [goto CHNAME_C]
else if 8 in HIKIND_C [goto OPNAME_C]
else if 9 in HIKIND_C [goto OGNAME_C]
else if 6 in HIKIND_C [goto MILSPC_C]
else [goto HINOTYR_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0260.00.1 **Variable:** PLANNAME1_C **Interview Module:** Child **Content Type:** Annual Core

Question Text:

Earlier I recorded that ^YOUSANAME ^WEREWAS covered by ^HIPNAM1_A. Is ^SCNAME covered by this same plan as ^YOUSANAME?

Fills:

YOUSANAME	Description	you/^SANAME
	Instruction	If GEN.SARESPSC_FLG=1, fill "you" else fill "^SANAME"
SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name
WEREWAS	Description	were/was
	Instruction	If SARESPSC_FLG=1, fill "were", else "was"
HIPNAM1_A	Description	{Value of HIPNAM1_A}
	Instruction	Fill value from Adult.INS.HIPNAM1_A
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage, where the Sample Adult interview has already been conducted, the Sample Adult is in the same family, and the Sample Adult also had private health insurance, and the first private plan is not self only coverage, a plan name was not don't know or refused, and the source and who pays for the coverage is not don't know or refused.

Skip Instructions:

```
<1> if Adult.INS.bPlan[1].POLHLD_A ne 1 [goto POLHLD1_C],
if INSPRI2_FLG2_C=1 and INSPRI2_FLG3_C=1 and INSPRI2_FLG4_C=1 and INSPRI2_FLG5_C=1 [goto
PLANNAME2_C] else [goto MORPLAN_C]
<2,RF,DK> if INSPRI2_FLG2_C=1 and INSPRI2_FLG3_C=1 and INSPRI2_FLG4_C=1 and INSPRI2_FLG5_C=1
[goto PLANNAME2_C] else [goto HIPNAM1_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0270.00.1 Variable: POLHLDA1_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Health insurance plans are usually obtained in one person's name even if other family members are covered by that plan. That person is called the policyholder. Is ^SCNAME the policyholder for ^HIPNAM1_A?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
HIPNAM1_A	Description	{Value of HIPNAM1_A}
	Instruction	Fill value from Adult.INS.HIPNAM1_A

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with a shared private health plan with the Sample Adult, where the Sample Adult is not the policyholder for their first private plan or refused or don't know.

Skip Instructions:

<1,2,RF,DK> if INSPRI2_FLG2_C=1 and INSPRI2_FLG3_C=1 and INSPRI2_FLG4_C=1 and INSPRI2_FLG5_C=1
 [goto PLANNAME2_C]
 else [goto MORPLAN_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0280.00.1 **Variable:** PLANNAME2_C **Interview Module:** Child **Content Type:** Annual Core

Question Text:

Earlier I recorded that ^YOUSANAME ^WEREWAS covered by a second plan ^HIPNAM2_A. Is ^SCNAME covered by this same plan as ^YOUSANAME?

Fills:

YOUSANAME	Description	you/^SANAME
	Instruction	If GEN.SARESPSC_FLG=1, fill "you" else fill "^SANAME"
SANAME	Description	Sample Adult's name
	Instruction	Sample Adult's name
WEREWAS	Description	were/was
	Instruction	If SARESPSC_FLG=1, fill "were", else "was"
HIPNAM2_A	Description	{Value of HIPNAM2_A}
	Instruction	Fill value from Adult.INS.HIPNAM2_A
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage, where the Sample Adult interview has already been conducted, the Sample Adult is in the same family, and the Sample Adult also had private health insurance, and listed two plans. The second private plan is not self only coverage, a plan name was not don't know or refused, and the source and who pays for the coverage is not don't know or refused.

Skip Instructions:

```
<1> if Adult.INS.bPlan[2].POLHLD_A ne 1 [goto POLHLDA2_C],
else if PLANNAME1_C IN(2,RF,DK) [goto MORPLAN_C]
else if 5 in HIKIND_C [goto CHNAME_C]
else if 8 in HIKIND_C [goto OPNAME_C]
else if 9 in HIKIND_C [goto OGNAME_C]
else if 6 in HIKIND_C [goto MILSPC_C]
else [goto HINOTYR_C]
<2,RF,DK> if PLANNAME1_C IN (2,RF,DK,empty) [goto HIPNAM1_C]
else [goto MORPLAN_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0290.00.1 Variable: POLHLDA2_C Interview Module: Child Content Type: Annual Core

Question Text:

[F1]

* **Read if necessary:** Health insurance plans are usually obtained in one person's name even if other family members are covered by that plan. That person is called the policyholder.

Is ^SCNAME the policyholder for ^HIPNAM2_A?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
HIPNAM2_A	Description	{Value of HIPNAM2_A}
	Instruction	Fill value from Adult.INS.HIPNAM2_A

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with a shared private health plan with the Sample Adult, where the adult is not the policyholder for their second private plan or refused or don't know

Skip Instructions:

```
<1,2,RF,DK> if PLANNAME1_C IN(2,RF,DK,empty) [goto MORPLAN_C]
else if 5 in HIKIND_C [goto CHNAME_C]
else if 8 in HIKIND_C [goto OPNAME_C]
else if 9 in HIKIND_C [goto OGNAME_C]
else if 6 in HIKIND_C [goto MILSPC_C]
else [goto HINOTYR_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0300.00.1 Variable: HIPNAM1_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

It is important that we record the complete and accurate name of each private health insurance plan. What is the COMPLETE name of ^SCNAME's plan? Do NOT include plans that only provide extra cash while in the hospital or plans that pay for only one type of service such as long term care, accidents, or dental care.

**Read if necessary: Do you have a health plan card or something with the plan name on it?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 enrolled in a Medigap plan or private health insurance and the sample child did not share or refused or did not know if they shared or did not have a value for both of the two listed private plans for the sample adult

Skip Instructions:

<allow 80,RF,DK> [goto MORPLAN_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0310.00.1 **Variable:** MORPLAN_C **Interview Module:** Child **Content Type:** Annual Core

Question Text:

?[F1]

Is ^SCNAME covered by any other private health insurance plans?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 enrolled in a private health plan where the name of the plan was given or don't know or refused or the sample child only shared one private plan with the Sample Adult

Skip Instructions:

```

<1> [goto HIPNAM2_C]
<2,RF,DK>
if (PLANNAME1_C = 1 or PLANNAME2_C = 1) then
  if 5 in HIKIND_C [goto CHNAME_C]
  else if 8 in HIKIND_C [goto OPNAME_C]
  else if 9 in HIKIND_C [goto OGNAME_C]
  else if 6 in HIKIND_C [goto MILSPC_C]
  else [goto HINOTYR_C]

else [goto bPlan[1].POLHLD_C]
    
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0320.00.1 Variable: HIPNAM2_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

What is the name of that private health insurance plan?

* **Read if necessary:** *Do you have a health plan card or something with the plan name on it?*

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 with a second private health insurance plan

Skip Instructions:

<allow 80,RF,DK> [goto bPlan[1].POLHLD_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0340.00.1 Variable: POLHLD_C Interview Module: Child Content Type: Annual Core

Question Text:

[F1]

I am going to ask you some questions about ^FIRSTPLANC. Health insurance plans are usually obtained in one person's name even if other family members are covered by that plan. That person is called the policyholder. Is ^SCNAME the policyholder for ^THISPLANC?

Fills:

FIRSTPLANC	Description	this plan/this first plan/this ^HIPNAM1_C plan/this second plan/this ^HIPNAM2_C plan
	Instruction	If PlanNum = 1 then if HIPNAM1_C IN (RF,DK) AND HIPNAM2_C=empty fill: "this plan" elseif HIPNAM1_C IN (RF,DK) fill: "this first plan" else fill: "this ^HIPNAM1_C plan" if PlanNum = 2 then if HIPNAM2_C IN (RF,DK) fill: "this second plan" else fill: "this ^HIPNAM2_C plan"
HIPNAM1_C	Description	{Value of HIPNAM1_C}
	Instruction	Fill value from Child.INS.HIPNAM1_C
HIPNAM2_C	Description	{Value of HIPNAM2_C}
	Instruction	Fill value from Child.INS.HIPNAM2_C
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
THISPLANC	Description	this plan/^HIPNAM1_C/^HIPNAM2_C
	Instruction	if PlanNum=1 then if HIPNAM1_C IN('RF','DK') fill: "this plan" Else fill: "^HIPNAM1_C" if PlanNum=2 then if HIPNAM2_C IN('RF','DK') fill: "this plan" Else fill: "^HIPNAM2_C"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage where a plan name was given or refused or don't know.

Skip Instructions:

<1,RF,DK> [goto PRPLCOV_C]
<2> [goto PLNWRK_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0350.00.1 Variable: PRPLCOV_C Interview Module: Child Content Type: Annual Core

Question Text:

Does this plan cover someone other than ^SCNAME?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage where a plan name was given or refused or don't know and where the Sample Child is the policyholder or refused or don't know.

Skip Instructions:

<1,2,RF,DK> [goto PLNWRK_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0360.00.1 Variable: PLNWRK_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Which one of these categories best describes how this plan was obtained? Was it obtained through an employer or union, purchased directly, obtained through Healthcare.gov or the Affordable Care Act, also known as Obamacare, obtained through a state or local government or community program or obtained in some other way?

Fills:

Response:

1	Through an employer, union, or professional association
2	Purchased directly
3	Through Healthcare.gov or the Affordable Care Act, also known as Obamacare
4	Through a state or local government or community program
5	Other
7	Refused
9	Don't Know

Universe:

Sample Children with private health insurance coverage where a plan name was given or refused or don't know.

Skip Instructions:

<1,3> [goto PLNPAY_C]
<2,4,RF,DK> [goto PLNEXCHG_C]
<5> [goto PLNWKSP_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0370.00.1 Variable: PLNWKSP_C Interview Module: Child Content Type: Annual Core

Question Text:

* **Read if necessary:** *How was this plan obtained?*

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage where a plan name was given or refused or don't know and private health insurance coverage was obtained from an other source

Skip Instructions:

<allow 80,RF,DK> [goto PLNEXCHG_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0380.00.1 Variable: PLNEXCHG_C Interview Module: Child Content Type: Annual Core

Question Text:

[F1]

Was the plan obtained through Healthcare.gov or the ^MARKETPLACE?

Fills:

MARKETPLACE	Description	Health Insurance marketplace names
	Instruction	If no state specified below, fill "Health Insurance Marketplace" If state specified below fill: If CA then fill "Health Insurance Marketplace, such as Covered California" If CO then fill "Health Insurance Marketplace, such as Connect for Health Colorado" If CT then fill "Health Insurance Marketplace, such as Access Health CT" If DC then fill "Health Insurance Marketplace, such as DC Health Link" If ID then fill "Health Insurance Marketplace, such as Your Health Idaho" If KY then fill "Health Insurance Marketplace, such as Kynect" If MA then fill "Health Insurance Marketplace, such as Massachusetts Health Connector" If ME then fill "Health Insurance Marketplace, such as CoverME" If MD then fill "Health Insurance Marketplace, such as Maryland Health Connection" If MN then fill "Health Insurance Marketplace, such as MNsure" If NJ then fill "Health Insurance Marketplace, such as GetCoveredNJ" If NV then fill "Health Insurance Marketplace, such as Nevada Health Link" If NM then fill "Health Insurance Marketplace, such as beWellnm" If NY then fill "Health Insurance Marketplace, such as NY State of Health" If PA then fill "Health Insurance Marketplace, such as Pennie" If RI then fill "Health Insurance Marketplace, such as HealthSource RI" If VA then fill "Health Insurance Marketplace, such as Virginia's Insurance Marketplace" If VT then fill "Health Insurance Marketplace, such as Vermont Health Connect" If WA then fill "Health Insurance Marketplace, such as Washington Healthplanfinder"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage where a plan name was given or refused or don't know and who have private coverage that is directly purchased, or obtained through a state, local, government or community program, or obtained another way, or refused/don't know how obtained

Skip Instructions:

<1,2,RF,DK> [goto PLNPAY_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0390.00.1 Variable: PLNPAY_C Interview Module: Child Content Type: Annual Core

Question Text:

Who pays for this health insurance plan?

* Enter all that apply, separate with commas.

Fills:

Response:

1	^SCNAME or family (living in the household)
2	Employer or union
3	Someone outside the household
4	Medicare
5	Medicaid
6	Other government program
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage where a plan name was given or refused or don't know and were enrolled in a private health plan where a plan name was given or refused or don't know.

Skip Instructions:

<1-6,RF,DK> if 1 IN PLNPAY_C [goto HICOSTN_C]
else [goto PRDEDUC_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0400.01.1 Variable: HICOSTN_C Interview Module: Child Content Type: Annual Core

Question Text:

[F1]

How much does ^SCNAME's family currently spend for health insurance premiums for ^FIRSTPLANC?
Please include payroll deductions for premiums.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
FIRSTPLANC	Description	this plan/this first plan/this ^HIPNAM1_C plan/this second plan/this ^HIPNAM2_C plan
	Instruction	If PlanNum = 1 then if HIPNAM1_C IN (RF,DK) AND HIPNAM2_C=empty fill: "this plan" elseif HIPNAM1_C IN (RF,DK) fill: "this first plan" else fill: "this ^HIPNAM1_C plan" if PlanNum = 2 then if HIPNAM2_C IN (RF,DK) fill: "this second plan" else fill: "this ^HIPNAM2_C plan"
HIPNAM1_C	Description	{Value of HIPNAM1_C}
	Instruction	Fill value from Child.INS.HIPNAM1_C
HIPNAM2_C	Description	{Value of HIPNAM2_C}
	Instruction	Fill value from Child.INS.HIPNAM2_C

Response:

00001-99995	Range of values
99997	Refused
99999	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage where a plan name was given or refused or don't know who paid for by self or family

Skip Instructions:

<20000-99995> [goto ERR1_HICOSTN_C]
<1-99999> [goto HICOSTT_C]
<RF,DK> [goto PRDEDUC_C]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_HICOSTN_C	Premium unusually high soft edit	{signal ERR1_HICOSTN_C} [^HICOSTN_C] is unusually high. Please verify. Make corrections if necessary.

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0400.02.1 Variable: HICOSTT_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

* Enter time period for premium payments.

Fills:

Response:

01	Once a week
02	Once every 2 weeks
03	Once a month
04	Twice a month
05	Every two months
06	Quarterly (every 3 months)
07	Once a year
08	Twice a year
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage where a plan name was given or refused or don't know who gave a premium amount.

Skip Instructions:

<1-8,RF,DK> [goto PRDEDUC_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0410.00.1 Variable: PRDEDUC_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

A deductible is the amount you have to pay for health care before your health insurance or health coverage plan will start paying your medical bills. Does this health plan have an annual deductible?

* **Read if necessary:** *A deductible is different from a copay (copayment).*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with private health insurance plans where a plan name was given or refused or don't know.

Skip Instructions:

<1> [goto PRHDHP_C]
<2,RF,DK> [goto INTROCOV_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0420.00.1 Variable: PRHDHP_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Is the ^FAM_C annual deductible for medical care for this plan less than ^HDHPAMT_C, or ^HDHPAMT_C or more? If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.

Fills:

FAM_C	Description	family
	Instruction	if POLHLD_C=2 or PRPLCOV_C=1, fill 'family'. Else no fill.
HDHPAMT_C	Description	^HDHPDED_family/^HDHPDED
	Instruction	if POLHLD_C=2 or PRPLCOV_C=1, fill "^HDHPDED_family" Else fill "^HDHPDED"
HDHPDED_family	Description	Family deductible threshold (may change in future year)
	Instruction	Fill: \$3,300
HDHPDED	Description	Deductible threshold (may change in future year)
	Instruction	Fill: \$1,650

Response:

1	Less than ^HDHPAMT_C
2	^HDHPAMT_C or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage where a plan name was given or refused or don't know with a deductible.

Skip Instructions:

<1> [goto INTROCOV_C]
<2,RF,DK> [goto HSAHRA_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0430.00.1 Variable: HSAHRA_C Interview Module: Child Content Type: Annual Core

Question Text:

There are special accounts or funds that can be used to pay for medical expenses, sometimes referred to as Health Savings Accounts or HSAs, Health Reimbursement Accounts or HRAs, Personal Care accounts, Personal Medical funds, or Choice funds. These are DIFFERENT from Flexible Spending Accounts or FSAs. Is there one of these accounts or funds with this plan?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage where a plan name was given or refused or don't know with a high deductible

Skip Instructions:

<1,2,RF,DK> [goto INTROCOV_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0435.00.1 Variable: INTROCOV_C Interview Module: Child Content Type: Annual Core

Question Text:

The next three questions are about services ^FIRSTPLANC may cover.

* Enter '1' to continue.

Fills:

FIRSTPLANC	Description	this plan/this first plan/this ^HIPNAM1_C plan/this second plan/this ^HIPNAM2_C plan
	Instruction	If PlanNum = 1 then if HIPNAM1_C IN (RF,DK) AND HIPNAM2_C=empty fill: "this plan" elseif HIPNAM1_C IN (RF,DK) fill: "this first plan" else fill: "this ^HIPNAM1_C plan" if PlanNum = 2 then if HIPNAM2_C IN (RF,DK) fill: "this second plan" else fill: "this ^HIPNAM2_C plan"
HIPNAM1_C	Description	{Value of HIPNAM1_C}
	Instruction	Fill value from Child.INS.HIPNAM1_C
HIPNAM2_C	Description	{Value of HIPNAM2_C}
	Instruction	Fill value from Child.INS.HIPNAM2_C

Response:

1	Enter 1 to Continue

Universe:

Sample Children 0-17 with private health insurance coverage where a plan name was given or refused or don't know

Skip Instructions:

<1> [goto PRRXCOV_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0440.00.1 Variable: PRRXCOV_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^FIRSTPLANC pay for any of the costs for medications prescribed by a doctor?

* **Read if necessary:** Even if ^SCNAME has not used this benefit, please answer if this plan would cover at least some of the costs if ^SCNAME were prescribed medications.

Fills:

FIRSTPLANC	Description	this plan/this first plan/this ^HIPNAM1_C plan/this second plan/this ^HIPNAM2_C plan
	Instruction	If PlanNum = 1 then if HIPNAM1_C IN (RF,DK) AND HIPNAM2_C=empty fill: "this plan" elseif HIPNAM1_C IN (RF,DK) fill: "this first plan" else fill: "this ^HIPNAM1_C plan" if PlanNum = 2 then if HIPNAM2_C IN (RF,DK) fill: "this second plan" else fill: "this ^HIPNAM2_C plan"
HIPNAM1_C	Description	{Value of HIPNAM1_C}
	Instruction	Fill value from Child.INS.HIPNAM1_C
HIPNAM2_C	Description	{Value of HIPNAM2_C}
	Instruction	Fill value from Child.INS.HIPNAM2_C
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage where the name of the plan was given or refused or don't know.

Skip Instructions:

<1,2,RF,DK> [goto PRDNCOV_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0450.00.1 Variable: PRDNCOV_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^FIRSTPLANC pay for any of the costs for dental care?

* **Read if necessary:** Even if ^SCNAME has not used this benefit, please answer if this plan would cover at least some of the costs if ^SCNAME did have dental care.

Fills:

FIRSTPLANC	Description	this plan/this first plan/this ^HIPNAM1_C plan/this second plan/this ^HIPNAM2_C plan
	Instruction	If PlanNum = 1 then if HIPNAM1_C IN (RF,DK) AND HIPNAM2_C=empty fill: "this plan" elseif HIPNAM1_C IN (RF,DK) fill: "this first plan" else fill: "this ^HIPNAM1_C plan" if PlanNum = 2 then if HIPNAM2_C IN (RF,DK) fill: "this second plan" else fill: "this ^HIPNAM2_C plan"
HIPNAM1_C	Description	{Value of HIPNAM1_C}
	Instruction	Fill value from Child.INS.HIPNAM1_C
HIPNAM2_C	Description	{Value of HIPNAM2_C}
	Instruction	Fill value from Child.INS.HIPNAM2_C
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage where the plan name was given or refused or don't know.

Skip Instructions:

<1,2,RF,DK> [goto PRVSCOV_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0460.00.1 Variable: PRVSCOV_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^FIRSTPLANC pay for any of the costs for routine vision care, such as glasses and contact lenses?

* **Read if necessary:** Even if ^SCNAME has not used this benefit, please answer if this plan would cover at least some of the costs if ^SCNAME did have vision care.

Fills:

FIRSTPLANC	Description	this plan/this first plan/this ^HIPNAM1_C plan/this second plan/this ^HIPNAM2_C plan
	Instruction	If PlanNum = 1 then if HIPNAM1_C IN (RF,DK) AND HIPNAM2_C=empty fill: "this plan" elseif HIPNAM1_C IN (RF,DK) fill: "this first plan" else fill: "this ^HIPNAM1_C plan" if PlanNum = 2 then if HIPNAM2_C IN (RF,DK) fill: "this second plan" else fill: "this ^HIPNAM2_C plan"
HIPNAM1_C	Description	{Value of HIPNAM1_C}
	Instruction	Fill value from Child.INS.HIPNAM1_C
HIPNAM2_C	Description	{Value of HIPNAM2_C}
	Instruction	Fill value from Child.INS.HIPNAM2_C
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with private health insurance coverage where a plan name was given or refused or don't know.

Skip Instructions:

```
<1,2,RF,DK> If there is another plan [goto bPlan for next plan]
else if 5 in HIKIND_C [goto CHNAME_C]
else if 8 in HIKIND_C [goto OPNAME_C]
else if 9 in HIKIND_C [goto OGNAME_C]
else if 6 in HIKIND_C [goto MILSPC_C]
else [goto HINOTYR_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0470.00.1 Variable: CHNAME_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Earlier I recorded that ^SCNAME is covered by the Children's Health Insurance Program or CHIP.
What is the name of the plan?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 with a CHIP plan

Skip Instructions:

<allow 80,RF,DK> [goto CHXCHNG_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0480.00.1 Variable: CHXCHNG_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Was ^SCNAME's CHIP plan obtained through Healthcare.gov or the ^MARKETPLACE?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
MARKETPLACE	Description	Health Insurance marketplace names
	Instruction	If no state specified below, fill "Health Insurance Marketplace" If state specified below fill: If CA then fill "Health Insurance Marketplace, such as Covered California" If CO then fill "Health Insurance Marketplace, such as Connect for Health Colorado" If CT then fill "Health Insurance Marketplace, such as Access Health CT" If DC then fill "Health Insurance Marketplace, such as DC Health Link" If ID then fill "Health Insurance Marketplace, such as Your Health Idaho" If KY then fill "Health Insurance Marketplace, such as Kynect" If MA then fill "Health Insurance Marketplace, such as Massachusetts Health Connector" If ME then fill "Health Insurance Marketplace, such as CoverME" If MD then fill "Health Insurance Marketplace, such as Maryland Health Connection" If MN then fill "Health Insurance Marketplace, such as MNSure" If NJ then fill "Health Insurance Marketplace, such as GetCoveredNJ" If NV then fill "Health Insurance Marketplace, such as Nevada Health Link" If NM then fill "Health Insurance Marketplace, such as beWellnm" If NY then fill "Health Insurance Marketplace, such as NY State of Health" If PA then fill "Health Insurance Marketplace, such as Pennie" If RI then fill "Health Insurance Marketplace, such as HealthSource RI" If VA then fill "Health Insurance Marketplace, such as Virginia's Insurance Marketplace" If VT then fill "Health Insurance Marketplace, such as Vermont Health Connect" If WA then fill "Health Insurance Marketplace, such as Washington Healthplanfinder"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with a CHIP plan

Skip Instructions:

<1,2,RF,DK> [goto CHPREM_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0490.00.1 Variable: CHPREM_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

A health insurance premium is the amount ^SCNAME or a family member pays each month for health care coverage. Does ^SCNAME or a family member pay a premium for this CHIP plan?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with a CHIP plan

Skip Instructions:

<1,2,RF,DK> [goto CHDEDUC_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0500.00.1 Variable: CHDEDUC_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

A deductible is the amount you have to pay for health care before your health insurance or health coverage plan will start paying your medical bills. Does ^SCNAME's CHIP plan have an annual deductible?

* **Read if necessary:** *A deductible is different from a copay (copayment).*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with a CHIP plan

Skip Instructions:

```
<1> [goto CHHDHP_C]
<2,RF,DK> if 8 in HIKIND_C [goto OPNAME_C]
           else if 9 in HIKIND_C [goto OGNAME_C]
           else if 6 in HIKIND_C [goto MILSPC_C]
           else [goto HINOTYR_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0510.00.1 Variable: CHHDHP_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Is the annual deductible for medical care for this plan less than ^HDHPDED or ^HDHPDED or more?
If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.

Fills:

HDHPDED	Description	Deductible threshold (may change in future year)
	Instruction	Fill: \$1,650

Response:

1	Deductible is less than \$1,600
2	Deductible is \$1,600 or more
7	Refused
9	Don't Know

Universe:

Sample Children with a CHIP plan who have a deductible

Skip Instructions:

```
<1,2,RF,DK> if 8 in HIKIND_C [goto OPNAME_C]
  else if 9 in HIKIND_C [goto OGNAMC_C]
  else if 6 in HIKIND_C [goto MILSPC_C]
  else [goto HINOTYR_C]
```


2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0520.00.1 Variable: OPNAME_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Earlier I recorded that ^SCNAME is covered by a state-sponsored plan. What is the name of the plan?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 with a state-sponsored plan

Skip Instructions:

<verbatim,RF,DK> [goto OPXCHNG_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0530.00.1 Variable: OPXCHNG_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Was ^SCNAME's state-sponsored plan obtained through Healthcare.gov or the ^MARKETPLACE?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
MARKETPLACE	Description	Health Insurance marketplace names
	Instruction	If no state specified below, fill "Health Insurance Marketplace" If state specified below fill: If CA then fill "Health Insurance Marketplace, such as Covered California" If CO then fill "Health Insurance Marketplace, such as Connect for Health Colorado" If CT then fill "Health Insurance Marketplace, such as Access Health CT" If DC then fill "Health Insurance Marketplace, such as DC Health Link" If ID then fill "Health Insurance Marketplace, such as Your Health Idaho" If KY then fill "Health Insurance Marketplace, such as Kynect" If MA then fill "Health Insurance Marketplace, such as Massachusetts Health Connector" If ME then fill "Health Insurance Marketplace, such as CoverME" If MD then fill "Health Insurance Marketplace, such as Maryland Health Connection" If MN then fill "Health Insurance Marketplace, such as MNSure" If NJ then fill "Health Insurance Marketplace, such as GetCoveredNJ" If NV then fill "Health Insurance Marketplace, such as Nevada Health Link" If NM then fill "Health Insurance Marketplace, such as beWellnm" If NY then fill "Health Insurance Marketplace, such as NY State of Health" If PA then fill "Health Insurance Marketplace, such as Pennie" If RI then fill "Health Insurance Marketplace, such as HealthSource RI" If VA then fill "Health Insurance Marketplace, such as Virginia's Insurance Marketplace" If VT then fill "Health Insurance Marketplace, such as Vermont Health Connect" If WA then fill "Health Insurance Marketplace, such as Washington Healthplanfinder"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with a state-sponsored plan

Skip Instructions:

<1,2,RF,DK> [goto OPPREM_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0540.00.1 Variable: OPPREM_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

A health insurance premium is the amount ^SCNAME or a family member pays each month for health care coverage. Does ^SCNAME or a family member pay a premium for this state-sponsored plan?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with a state-sponsored plan

Skip Instructions:

<1,2,RF,DK> [goto OPDEDUC_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0550.00.1 Variable: OPDEDUC_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

A deductible is the amount you have to pay for health care before your health insurance or health coverage plan will start paying your medical bills. Does ^SCNAME's state-sponsored plan have an annual deductible?

* **Read if necessary:** *A deductible is different from a copay (copayment).*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with a state-sponsored plan

Skip Instructions:

```
<1>[goto OPHDHP_C]
<2,RF,DK> if 9 in HIKIND_C [goto OGNAME_C]
           else if 6 in HIKIND_C [goto MILSPC_C]
           else [goto HINOTYR_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0560.00.1 Variable: OPHDHP_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Is the annual deductible for medical care for this plan less than ^HDHPDED or ^HDHPDED or more?
If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.

Fills:

HDHPDED	Description	Deductible threshold (may change in future year)
	Instruction	Fill: \$1,650

Response:

1	Deductible is less than \$1,600
2	Deductible is \$1,600 or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with a state-sponsored plan with a deductible

Skip Instructions:

<1,2,RF,DK> if 9 in HIKIND_C [goto OGNAME_C]
else if 6 in HIKIND_C [goto MILSPC_C]
else [goto HINOTYR_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0570.00.1 Variable: OGNAME_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Earlier I recorded that ^SCNAME is covered by an other government program. What is the name of the plan?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 who have an other government plan

Skip Instructions:

<allow 80,RF,DK> [goto OGXCHNG_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0580.00.1 Variable: OGXCHNG_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

Was ^SCNAME's other government plan obtained through Healthcare.gov or the ^MARKETPLACE?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
MARKETPLACE	Description	Health Insurance marketplace names
	Instruction	If no state specified below, fill "Health Insurance Marketplace" If state specified below fill: If CA then fill "Health Insurance Marketplace, such as Covered California" If CO then fill "Health Insurance Marketplace, such as Connect for Health Colorado" If CT then fill "Health Insurance Marketplace, such as Access Health CT" If DC then fill "Health Insurance Marketplace, such as DC Health Link" If ID then fill "Health Insurance Marketplace, such as Your Health Idaho" If KY then fill "Health Insurance Marketplace, such as Kynect" If MA then fill "Health Insurance Marketplace, such as Massachusetts Health Connector" If ME then fill "Health Insurance Marketplace, such as CoverME" If MD then fill "Health Insurance Marketplace, such as Maryland Health Connection" If MN then fill "Health Insurance Marketplace, such as MNSure" If NJ then fill "Health Insurance Marketplace, such as GetCoveredNJ" If NV then fill "Health Insurance Marketplace, such as Nevada Health Link" If NM then fill "Health Insurance Marketplace, such as beWellnm" If NY then fill "Health Insurance Marketplace, such as NY State of Health" If PA then fill "Health Insurance Marketplace, such as Pennie" If RI then fill "Health Insurance Marketplace, such as HealthSource RI" If VA then fill "Health Insurance Marketplace, such as Virginia's Insurance Marketplace" If VT then fill "Health Insurance Marketplace, such as Vermont Health Connect" If WA then fill "Health Insurance Marketplace, such as Washington Healthplanfinder"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who have an other government plan

Skip Instructions:

<1,2,RF,DK> [goto OGPREM_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0590.00.1 Variable: OGPREM_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

A health insurance premium is the amount ^SCNAME or a family member pays each month for health care coverage. Does ^SCNAME or a family member pay a premium for this other government plan?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who have an other government plan

Skip Instructions:

<1,2,RF,DK> [goto OGDEDUC_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0600.00.1 Variable: OGDEDUC_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

A deductible is the amount you have to pay for health care before your health insurance or health coverage plan will start paying your medical bills. Does ^SCNAME's other government plan have an annual deductible?

* **Read if necessary:** *A deductible is different from a copay (copayment).*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with an other government plan

Skip Instructions:

```
<1> [goto OGDHP_C]
<2,RF,DK> if 6 in HIKIND_C [goto MILSPC_C]
      else [goto HINOTYR_C]
```

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0610.00.1 Variable: OGHDP_C Interview Module: Child Content Type: Annual Core

Question Text:

[F1]

Is the annual deductible for medical care for this plan less than ^HDHPDED or ^HDHPDED or more?
If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.

Fills:

HDHPDED	Description	Deductible threshold (may change in future year)
	Instruction	Fill: \$1,650

Response:

1	Deductible is less than \$1,600
2	Deductible is \$1,600 or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with an other government plan with a deductible

Skip Instructions:

<1,2,RF,DK> if 6 in HIKIND_C [goto MILSPC_C]
else [goto HINOTYR_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0620.00.1 Variable: MILSPC_C Interview Module: Child Content Type: Annual Core

Question Text:

[F1]

Earlier I recorded that ^SCNAME is covered by military related health care. What types of military related health care ^areisSEX_C ^heshe_C covered by?

* Enter all that apply, separate with commas.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
areisSEX_C	Description	is/are
	Instruction	if GEN.SEX_FINAL[PX_C] in (1,2) fill: "is" elseif GEN.SEX_FINAL[PX_C] in (DK,RF) fill: "are"
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

2	TRICARE (CHAMPUS)
3	CHAMP-VA (do not include CHAMPUS)
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with military related health care

Skip Instructions:

<2-3,RF,DK> [goto HINOTYR_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0630.00.1 Variable: HILAST_C Interview Module: Child Content Type: Annual Core

Question Text:

How long has it been since ^SCNAME last had health care coverage that paid for doctor's visits or hospital stays?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

0	Never
1	Within the past year (anytime less than 12 months ago)
2	Within the last 2 years (1 year but less than 2 years ago)
3	Within the last 3 years (2 years but less than 3 years ago)
4	Within the last 5 years (3 years but less than 5 years ago)
5	Within the last 10 years (5 years but less than 10 years ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 without known health insurance and answered no, refused or don't know to the Medicaid probe.

Skip Instructions:

<1> [goto HILASTMY_C]
 <2,3> [goto HISTOPJOB_C]
 <4,5,6,0,RF,DK> [goto RSNHICOST_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0640.00.1 Variable: HILASTMY_C Interview Module: Child Content Type: Annual Core

Question Text:

In the past 12 months, how many months was ^SCNAME without coverage?

* If less than 1 month, enter '1'.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

01-12	Range of values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 without known health insurance who last had insurance at some time within the last 12 months

Skip Instructions:

<1-12,RF,DK> [goto HISTOPJOB_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0650.00.1 Variable: HISTOPJOB_C Interview Module: Child Content Type: Annual Core

Question Text:

[F1]

Think about the last time that ^SCNAME did have health care coverage. I am going to read a list of reasons why someone might no longer be enrolled in coverage. Please tell me, yes or no, if this is a reason why ^SCNAME is no longer enrolled in ^hisher_C last health care plan.

The policyholder retired, lost a job, or changed employer?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who have been uninsured for less than 3 years

Skip Instructions:

<1,2,RF,DK> [goto HISTOPMISS_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0660.00.1 Variable: HISTOPMISS_C Interview Module: Child Content Type: Annual Core

Question Text:

***Read if necessary:** *Is ^SCNAME no longer enrolled in ^hisher_C last health care plan because...*

A deadline was missed for signing up or paying for ^hisher_C coverage?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who have been uninsured for less than 3 years

Skip Instructions:

<1,2,RF,DK> [goto HISTOPAGE_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0670.00.1 Variable: HISTOPAGE_C Interview Module: Child Content Type: Annual Core

Question Text:

***Read if necessary:** Is ^SCNAME no longer enrolled in ^hisher_C last health care plan because...

^HeShe_C became ineligible because of ^hisher_C age or because ^heshe_C left school?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
HeShe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who have been uninsured for less than 3 years

Skip Instructions:

<1,2,RF,DK> [goto HISTOPCOST_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0680.00.1 Variable: HISTOPCOST_C Interview Module: Child Content Type: Annual Core

Question Text:

***Read if necessary:** *Is ^SCNAME no longer enrolled in ^hisher_C last health care plan because...*

The cost for the coverage increased?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who have been uninsured for less than 3 years

Skip Instructions:

<1,2,RF,DK> [goto HISTOPELIG_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0690.00.1 Variable: HISTOPELIG_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

* **Read if necessary:** *Is ^SCNAME no longer enrolled in ^hisher_C last health care plan because...*

^HeShe_C had Medicaid, CHIP, or other public coverage, but ^werewas_C no longer eligible?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
HeShe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"
werewas_C	Description	was/were
	Instruction	If SEX_FINAL_C=1,2 fill "was" else if SEX_FINAL_C=DK, RF fill "were"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who have been uninsured for less than 3 years

Skip Instructions:

<1,2,RF,DK> [goto RSNHICOST_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0700.00.1 Variable: RSNHICOST_C Interview Module: Child Content Type: Annual Core

Question Text:

^INSREASONS_C Is ^SCNAME currently uninsured because coverage is not affordable?

Fills:

INSREASONS_C	Description	RSNHICOST_C Introduction
	Instruction	If HILAST_C=0,4,5,6,RF,DK, fill: "There are many reasons why people do not have health insurance coverage." If HILAST_C=1,2,3, fill: "We just discussed reasons you lost coverage, now I am going to ask you some questions about why ^SCNAME hasn't obtained coverage."
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 without known health insurance and answered no, refused or don't know to the Medicaid probe.

Skip Instructions:

<1,2,RF,DK> [goto RSNHIWANT_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0710.00.1 **Variable:** RSNHIWANT_C **Interview Module:** Child **Content Type:** Annual Core

Question Text:

There are other reasons that people do not have health insurance coverage. ^PLUSCOSTC ^SCNAME currently uninsured because...

...your family does not need or want coverage for ^SCNAME?

Fills:

PLUSCOSTC	Description	In addition to cost, is/Is
	Instruction	if REASNHICOST_C = 1 then fill "In addition to cost, is" Else fill "Is"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 without known health insurance and answered no, refused or don't know to the Medicaid probe.

Skip Instructions:

<1,2,RF,DK> [goto RSNHIELIG_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0720.00.1 Variable: RSNHIELIG_C Interview Module: Child Content Type: Annual Core

Question Text:

* **Read if necessary:** *There are other reasons that people do not have health insurance coverage.*
^PLUSCOSTC ^SCNAME currently uninsured because...

...^heshe_C ^areisSEX_C not eligible for coverage?

Fills:

PLUSCOSTC	Description	In addition to cost, is/Is
	Instruction	if REASNHICOST_C = 1 then fill "In addition to cost, is" Else fill "Is"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"
areisSEX_C	Description	is/are
	Instruction	if GEN.SEX_FINAL[PX_C] in (1,2) fill: "is" elseif GEN.SEX_FINAL[PX_C] in (DK,RF) fill: "are"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 without known health insurance and answered no, refused or don't know to the Medicaid probe

Skip Instructions:

<1,2,RF,DK> [goto RSNHICONF_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0730.00.1 Variable: RSNHICONF_C Interview Module: Child Content Type: Annual Core

Question Text:

* **Read if necessary:** *There are other reasons that people do not have health insurance coverage.*
^PLUSCOSTC ^SCNAME currently uninsured because...

...the process of signing up for coverage for ^SCNAME is too difficult or confusing?

Fills:

PLUSCOSTC	Description	In addition to cost, is/Is
	Instruction	if REASNHICOST_C = 1 then fill "In addition to cost, is" Else fill "Is"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 without known health insurance and answered no, refused or don't know to the Medicaid probe

Skip Instructions:

<1,2,RF,DK> [goto RSNHIMEET_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0740.00.1 Variable: RSNHIMEET_C Interview Module: Child Content Type: Annual Core

Question Text:

***Read if necessary:** *There are other reasons that people do not have health insurance coverage.
^PLUSCOSTC ^SCNAME currently uninsured because...*

...your family cannot find a plan that meets ^SCNAME's needs?

Fills:

PLUSCOSTC	Description	In addition to cost, is/Is
	Instruction	if REASNHCOST_C = 1 then fill "In addition to cost, is" Else fill "Is"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 without known health insurance and answered no, refused or don't know to the Medicaid probe

Skip Instructions:

<1,2,RF,DK> [goto RSNHIWAIT_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0750.00.1 Variable: RSNHIWAIT_C Interview Module: Child Content Type: Annual Core

Question Text:

***Read if necessary:** *There are other reasons that people do not have health insurance coverage.
^PLUSCOSTC ^SCNAME currently uninsured because...*

...you applied for coverage for ^SCNAME but it has not started yet?

Fills:

PLUSCOSTC	Description	In addition to cost, is/Is
	Instruction	if REASNHCOST_C = 1 then fill "In addition to cost, is" Else fill "Is"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 without known health insurance and answered no, refused or don't know to the Medicaid probe

Skip Instructions:

<1,2,RF,DK> [goto RSNHIOTH_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0760.00.1 Variable: RSNHIOTH_C Interview Module: Child Content Type: Annual Core

Question Text:

Is there another reason that ^SCNAME currently does not have health insurance coverage?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 without known health insurance and answered no, refused or don't know to the Medicaid probe

Skip Instructions:

<1> [goto RSNHIOTHSP_C]
<2,RF,DK> [goto FINISH_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0770.00.1 Variable: RSNHIOTHSP_C Interview Module: Child Content Type: Annual Core

Question Text:

What is the other reason for not having coverage?

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 who have another reason for not having coverage

Skip Instructions:

<allow 80,RF,DK> [goto FINISH_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0780.00.1 Variable: HINOTYR_C Interview Module: Child Content Type: Annual Core

Question Text:

In the past 12 months, was there any time when ^SCNAME did NOT have ANY health insurance or coverage?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with known health insurance coverage or responded yes to the medicaid probe

Skip Instructions:

<1> [goto HINOTMYR_C]
<2,RF,DK> [goto FINISH_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0790.00.1 Variable: HINOTMYR_C Interview Module: Child Content Type: Annual Core

Question Text:

In the past 12 months, about how many months was ^SCNAME without coverage?

* If less than 1 month, enter '1'.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

01-12	Range of values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 with known health insurance coverage and did not have health insurance for some period of time in the past 12 months

Skip Instructions:

<1-12,RF,DK> [goto FINISH_C]

2025 National Health Interview Survey (NHIS) Questionnaire

INS: Health Insurance

Question ID: INS.0800.00.1 Variable: FINISH_C Interview Module: Child Content Type: Annual Core

Question Text:

- * The Sample Child health insurance section is now complete.
- * Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

PAY: Difficulty Paying for Health Care

Question ID: PAY.0010.00.1 Variable: PAYINTRO_C Interview Module: Child Content Type: Annual Core

Question Text:

Now I am going to ask you about your family's medical bills. Include bills for doctors, dentists, hospitals, therapists, medication, equipment, and nursing home or home care.

* Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Children 0-17 living in same family as the Sample Adult when the PAY section of the Sample Adult has not been completed
or Sample Children living in same family as Sample Adult when the Sample Child respondent is not the Sample Adult and the Sample Adult answered don't or refused to PAYBLL12M_A and PAYNOBLLNW_A
or Sample children living in different families than the Sample Adult.

Skip Instructions:

<1> [goto PAYBILL12M_C]

Replicate To:

PAYINTRO_A

2025 National Health Interview Survey (NHIS) Questionnaire

PAY: Difficulty Paying for Health Care

Question ID: PAY.0020.00.1 Variable: PAYBLL12M_C Interview Module: Child Content Type: Annual Core

Question Text:

In the past 12 months, did anyone in your family have problems paying or were unable to pay any medical bills?

* **Read if necessary:** *Include bills for doctors, dentists, hospitals, therapists, medication, equipment, nursing home or home care.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 living in same family as the Sample Adult when the PAY section of the Sample Adult has not been completed
or Sample Children living in same family as Sample Adult when the Sample Child respondent is not the Sample Adult and the Sample Adult answered don't or refused to PAYBILL12M_A and PAYNOBLLNW_A
or Sample children living in different families than the Sample Adult.

Skip Instructions:

<1,RF,DK> [goto PAYNOBLLNW_C]
<2> [goto PAYWORRY_C]

Replicate To:

PAYBLL12M_A

2025 National Health Interview Survey (NHIS) Questionnaire

PAY: Difficulty Paying for Health Care

Question ID: PAY.0030.00.1 Variable: PAYNOBLLNW_C Interview Module: Child Content Type: Annual Core

Question Text:

Does anyone in your family currently have any medical bills that you are unable to pay at all?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who said someone in their family had trouble paying bills and Sample Adult and Sample Child are in the same family and Sample Adult PAY section has not been completed OR the Sample Child and Sample Adult are not in the same family AND said anyone in their family had problems paying medical bills in the past 12 months or refused or didn't know if they had problems paying medical bills.

Skip Instructions:

<1,2,RF,DK> [goto PAYWORRY_C]

Replicate To:

PAYNOBLLNW_A

2025 National Health Interview Survey (NHIS) Questionnaire

PAY: Difficulty Paying for Health Care

Question ID: PAY.0040.00.1 Variable: PAYWORRY_C Interview Module: Child Content Type: Annual Core

Question Text:

If ^SCNAME gets sick or has an accident, how worried are you that your family will be able to pay ^hisher_C medical bills? Are you very worried, somewhat worried, or not at all worried?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Very worried
2	Somewhat worried
3	Not at all worried
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1-3,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

CVL: Long-COVID

Question ID: CVL.0010.00.3 Variable: CVDINTRO_C Interview Module: Child Content Type: Sponsored Content

Question Text:

The next set of questions are about coronavirus or COVID-19.

* Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto EVERCOVID_C]

2025 National Health Interview Survey (NHIS) Questionnaire

CVL: Long-COVID

Question ID: CVL.0020.00.3 Variable: EVERCOVD_C Interview Module: Child Content Type: Sponsored Content

Question Text:

Has ^SCNAME ever had COVID-19?

* **Read if necessary:** Include being told by a doctor or other health professional that ^SCNAME had or likely had COVID-19. Also include antibodies or blood tests as well as other forms of testing for COVID-19, such as a nasal swabbing or throat swabbing. Also include if ^SCNAME had close contact with someone who had COVID-19 and ^SCNAME had symptoms.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto LONGCOVD2_C]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

CVL: Long-COVID

Question ID: CVL.0030.00.3 Variable: LONGCOVID2_C Interview Module: Child Content Type: Sponsored Content

Question Text:

Did ^SCNAME have any symptoms lasting 3 months or longer that ^heshe_C did not have before having COVID-19?

** Read if necessary: Long term symptoms may include tiredness or fatigue, difficulty thinking, concentrating, forgetfulness or memory problems, sometimes referred to as "brain fog," difficulty breathing or shortness of breath, joint or muscle pain, fast-beating or pounding heart (also known as heart palpitations), chest pain, dizziness on standing, smell or taste loss or alteration in ability to smell or taste, ^menstrual and inability to exercise.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"
menstrual	Description	menstrual changes
	Instruction	If GEN.SEX_FINAL=2,RF,DK and GEN.AGE_FINAL=9-58, fill "menstrual changes," else fill blank

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who have ever had COVID-19

Skip Instructions:

<1> [goto SYMPNOW1_C]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

CVL: Long-COVID

Question ID: CVL.0040.00.3 Variable: SYMPNOW1_C Interview Module: Child Content Type: Sponsored Content

Question Text:

Does ^SCNAME have symptoms NOW?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who have ever had COVID-19 and had symptoms lasting 3 months or longer

Skip Instructions:

<1> [goto LCVDACT_C]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

CVL: Long-COVID

Question ID: CVL.0050.00.3 Variable: LCVDACT_C Interview Module: Child Content Type: Sponsored Content

Question Text:

How much do these long-term symptoms reduce ^SCNAME's ability to carry out day-to-day activities compared with the time before ^SCNAME had COVID-19? Would you say not at all, a little, or a lot?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	A little
3	A lot
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with COVID-19 symptoms lasting 3 months or longer that they did not have before having coronavirus or COVID-19 and they have symptoms now

Skip Instructions:

<1-3,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

DNC: Dental Care

Question ID: DNC.0010.00.2 Variable: DNCINTRO_C Interview Module: Child Content Type: Rotating Core

Question Text:

These next questions ask about ^SCNAME's dental care.

* Enter '1' to continue.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Enter 1 to Continue

Universe:

Sample children 1-17

Skip Instructions:

<1> [goto DENPREV_C]

2025 National Health Interview Survey (NHIS) Questionnaire

DNC: Dental Care

Question ID: DNC.0020.00.2 Variable: DENPREV_C Interview Module: Child Content Type: Rotating Core

Question Text:

About how long has it been since ^SCNAME last had a dental examination or cleaning?

* **Read if necessary:** Include cleanings from all types of dental care providers such as dentists, orthodontists, oral surgeons, dental hygienists, and all other dental specialists.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

0	Never
1	Within the past year (anytime less than 12 months ago)
2	Within the last 2 years (1 year but less than 2 years ago)
3	Within the last 3 years (2 years but less than 3 years ago)
4	Within the last 5 years (3 years but less than 5 years ago)
5	Within the last 10 years (5 years but less than 10 years ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample Children 1-17

Skip Instructions:

<0-6,RF,DK> [goto DENDL12M_C]

2025 National Health Interview Survey (NHIS) Questionnaire

DNC: Dental Care

Question ID: DNC.0030.00.2 Variable: DENDL12M_C Interview Module: Child Content Type: Rotating Core

Question Text:

During the past 12 months, has ^SCNAME been DELAYED in getting dental care because of the cost?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 1-17

Skip Instructions:

<1,2,RF,DK> [goto DENNG12M_C]

2025 National Health Interview Survey (NHIS) Questionnaire

DNC: Dental Care

Question ID: DNC.0040.00.2 Variable: DENNG12M_C Interview Module: Child Content Type: Rotating Core

Question Text:

During the past 12 months, was there any time when ^SCNAME needed dental care, but DID NOT GET IT because of the cost?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 1-17

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0010.00.1 Variable: UTZINTRO_C Interview Module: Child Content Type: Annual Core

Question Text:

^UTZINTRO2_C

* Enter '1' to continue.

Fills:

UTZINTRO2_C	Description	UTZ introduction
	Instruction	If AGE LT 1 fill "I would like to ask you about ^SCNAME's health care." else fill "Now, I would like to ask you about ^SCNAME's health care, not including dental care."
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Enter 1 to Continue

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto LASTDR_C]

2025 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0020.00.1 Variable: LASTDR_C Interview Module: Child Content Type: Annual Core

Question Text:

About how long has it been since ^SCNAME last saw a doctor or other health professional about ^hisher_C health?

* **Read if necessary:** Do not include appointments by video or phone.

* **Read if necessary:** Include doctors seen while a patient in a hospital.

* **Read if necessary:** Do not include dental care.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

0	Never
1	Within the past year (anytime less than 12 months ago)
2	Within the last 2 years (1 year but less than 2 years ago)
3	Within the last 3 years (2 years but less than 3 years ago)
4	Within the last 5 years (3 years but less than 5 years ago)
5	Within the last 10 years (5 years but less than 10 years ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1-6> [goto WELLNESS_C]

<0,RF,DK> [goto USUALPL_C]

2025 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0030.00.1 Variable: WELLNESS_C Interview Module: Child Content Type: Annual Core

Question Text:

Was this a well ^babychild visit, physical, or general purpose check-up?

* **Read if necessary:** This kind of visit typically includes: height and weight measurements, vaccinations, and vision or hearing checks. The doctor or other health professional may also discuss topics related to ^SCNAME's health such as ^hisher_C growth and development, diet and exercise, safety, and sleep patterns. These visits are usually scheduled in advance and occur when ^hesheistheyare_C not sick.

* **Read if necessary:** If a wellness exam was combined with a sick care visit, include this visit.

* **Read if necessary:** An obstetrician/gynecologist (OB/GYN) may perform this visit.

Fills:

babychild	Description	baby/child
	Instruction	If AGE LE 2 fill "baby"; else if AGE GE 3 or AGE IN ('DK','RF') fill "child"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
hesheistheyare_C	Description	he is/she is/they are
	Instruction	If SEX_FINAL_C=1 fill: "he is" If SEX_FINAL_C=2 fill: "she is" If SEX_FINAL_C =blank fill: "they are"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who have seen a doctor

Skip Instructions:

<1> [goto USUALPL_C]
<2,RF,DK> [goto WELLVIS_C]

2025 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0040.00.1 Variable: WELLVIS_C Interview Module: Child Content Type: Annual Core

Question Text:

About how long has it been since ^SCNAME last saw a doctor or other health professional for a well ^babychild visit, physical, or general purpose check-up?

* **Read if necessary:** This kind of visit typically includes: height and weight measurements, vaccinations, and vision or hearing checks. The doctor or other health professional may also discuss topics related to ^SCNAME's health such as ^hisher_C growth and development, diet and exercise, safety, and sleep patterns. These visits are usually scheduled in advance and occur when ^hesheistheyare_C not sick.

* **Read if necessary:** If a wellness exam was combined with a sick care visit, include this visit.

* **Read if necessary:** An obstetrician/gynecologist (OB/GYN) may perform this visit.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
babychild	Description	baby/child
	Instruction	If AGE LE 2 fill "baby"; else if AGE GE 3 or AGE IN ('DK','RF') fill "child"
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
hesheistheyare_C	Description	he is/she is/they are
	Instruction	If SEX_FINAL_C=1 fill: "he is" If SEX_FINAL_C=2 fill: "she is" If SEX_FINAL_C =blank fill: "they are"

Response:

0	Never
1	Within the past year (anytime less than 12 months ago)
2	Within the last 2 years (1 year but less than 2 years ago)
3	Within the last 3 years (2 years but less than 3 years ago)
4	Within the last 5 years (3 years but less than 5 years ago)
5	Within the last 10 years (5 years but less than 10 years ago)
6	10 years ago or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 were reported to have seen a doctor, but the last visit was not a wellness visit or they didn't know or refused whether it was a wellness visit

Skip Instructions:

<0-6,RF,DK> [goto USUALPL_C]

2025 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0050.00.1 Variable: USUALPL_C Interview Module: Child Content Type: Annual Core

Question Text:

Is there a place that ^SCNAME USUALLY goes to if ^hesheistheyare_C sick and needs health care?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hesheistheyare_C	Description	he is/she is/they are
	Instruction	If SEX_FINAL_C=1 fill: "he is" If SEX_FINAL_C=2 fill: "she is" If SEX_FINAL_C =blank fill: "they are"

Response:

1	Yes
2	There is NO place
3	There is MORE THAN ONE place
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,3,RF,DK> [goto USPLKIND_C]
<2> [goto RETURGIN_C]

2025 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0060.00.1 Variable: USPLKIND_C Interview Module: Child Content Type: Annual Core

Question Text:

What kind of place ^isitgomostoften - a doctor's office or health center; an urgent care center, a clinic in a drug store or grocery store; a hospital emergency room; or some other place?

* **Read if necessary:** A doctor's office or health center is a place where ^heshe_C see^s the same doctor or the same group of doctors every visit, where you usually need to make an appointment ahead of time, and where ^hisher_C medical records are on file.

* **Read if necessary:** Urgent care centers, and clinics in a drug store or grocery store are places where you do not need to make an appointment ahead of time, and do not usually see the same health care provider at each visit.

Fills:

isitgomostoften	Description	is it/^doesheshedothey go to most often
	Instruction	If USUALPL_C=1, fill: "is it" else fill: "^doesheshedothey go to most often"
doesheshedothey	Description	does he/does she/do they
	Instruction	If SEX=1 fill: "does he" If SEX=2 fill: "does she" If SEX IN ('DK','RF') fill: "do they"
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"
s	Description	s
	Instruction	if SEX_FINAL[PX_C]=1,2 fill "s" else fill blank
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	A doctor's office or health center
2	Urgent care center or clinic in a drug store or grocery store
3	Hospital emergency room
4	Some other place
5	Does not go to one place most often
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with 1+ usual place of care or who don't know or refused to answer if they have a usual place of care

Skip Instructions:

<1-5,RF,DK> [goto RETURGINT_C]

2025 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0065.00.1 Variable: RETURGIN_T_C Interview Module: Child Content Type: Annual Core

Question Text:

The next questions are about ^SCNAME's use of retail health clinics and urgent care centers.

* Enter '1' to continue.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Enter 1 to Continue

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto RETAILHC12M_C]

2025 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0070.00.1 Variable: RETAILHC12M_C Interview Module: Child Content Type: Annual Core

Question Text:

Retail health clinics are located in a pharmacy, grocery store, or supercenter.

During the past 12 months, how many times has ^SCNAME gone to a retail health clinic about ^hisher_C health?

* Enter 96 if number is 96 or greater.

* **Read if necessary:** Common examples of retail health clinics include places like CVS Minute Clinic, Walgreens Health Clinic, or clinics in a Walmart or Kroger supermarket. These clinics can provide common services such as certain vaccinations, as well as testing for or treatment of minor uncomplicated illnesses.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

00-95	0-95 times
96	96+ times
97	Refused
99	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<0-39,RF,DK> [goto URGCC12M_C]
<40-96> [goto ERR1_RETAILHC12M_C]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_RETAILHC12M_C	Retail health clinic 40-96 times	{signal ERR1_RETAILHC12M_C} ^RETAILHC12M_C is an unusually large number. Did ^SCNAME visit a retail health clinic center about ^hisher_C health ^RETAILHC12M_C times in the past 12 months? Please verify.

2025 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0075.00.1 Variable: URGCC12M_C Interview Module: Child Content Type: Annual Core

Question Text:

An urgent care center is located in its own building or space. These centers can provide services such as x-rays and stitches.

During the past 12 months, how many times has ^SCNAME gone to an urgent care center about ^hisher_C health?

* Enter 96 if number is 96 or greater.

* Read if necessary: An urgent care center can provide common vaccinations, testing for or treatment of illnesses. They can also treat illnesses or injuries that require immediate care but are not serious enough to require a visit to a hospital emergency room.

* Read if necessary: This is different from a hospital emergency room.

* Read if necessary: These centers provide care during business hours, evenings, and weekends.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

00-95	0-95 times
96	96+ times
97	Refused
99	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<0-39,RF,DK> [goto EMERGE12M_C]
<40-96> [goto ERR1_URGCC12M_C]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_URGCC12M_C	Urgent care 40-96 times	{signal ERR1_URGCC12M_C} ^URGCC12M_C is an unusually large number. Did ^SCNAME visit an urgent care center about ^hisher_C health ^URGCC12M_C times in the past 12 months? Please verify.

2025 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0080.00.1 Variable: EMERGE12M_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, how many times has ^SCNAME gone to a hospital emergency room about ^hisher_C health?

* **Read if necessary:** *This includes emergency room visits that resulted in a hospital admission.*

* **Enter '96' if number is 96 or more.**

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

00-95	0-95 times
96	96+ times
97	Refused
99	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<0-39,RF,DK> if GEN.AGE_FINAL GE 001 [goto HOSPONGT_C]
else [goto MEDDL12M_C]
<40-96> [goto ERR1_EMERGE12M_C]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_EMERGE12M_C	ER 40-96 times	{signal ERR1_EMERGE12M_C}
		^EMERGE12M_C is an unusually large number. Did ^SCNAME visit a hospital emergency room about ^hishertheir health ^EMERGE12M_C times in the past 12 months?
		Please verify.

2025 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0090.00.1 Variable: HOSPONGT_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, has ^SCNAME been hospitalized overnight? ^PAST12MER_C

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
PAST12MER_C	Description	Do not include an overnight stay in the emergency room.
	Instruction	If ((EMERGE12M_C GE '01' and EMERGE12M_C LE '96') or EMERGE12M_C='RF','DK'): Fill: "Do not include an overnight stay in the emergency room."

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 1-17

Skip Instructions:

<1,2,RF,DK> [goto MEDDL12M_C]

2025 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0100.00.1 Variable: MEDDL12M_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, has medical care BEEN DELAYED for ^SCNAME because of the cost?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,2,RF,DK> [goto MEDNG12M_C]

2025 National Health Interview Survey (NHIS) Questionnaire

UTZ: Utilization

Question ID: UTZ.0110.00.1 Variable: MEDNG12M_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, was there any time when ^SCNAME needed medical care, but DID NOT GET IT because of the cost?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

TLH: Telehealth

Question ID: TLH.0010.00.1 Variable: VIRAPP12M_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, has ^SCNAME had an appointment with a doctor, nurse, or other health professional by video or by phone?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

PMD: Prescription medications

Question ID: PMD.0010.00.1 Variable: RX12M_C Interview Module: Child Content Type: Annual Core

Question Text:

At any time in the past 12 months, did ^SCNAME take prescription medication?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto RXDL12M_C]
<2,RF,DK> [goto RXDG12M_C]

2025 National Health Interview Survey (NHIS) Questionnaire

PMD: Prescription medications

Question ID: PMD.0020.00.1 Variable: RXDL12M_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, did you DELAY filling a prescription for ^SCNAME to save money?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who have taken prescription medication in the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto RXDG12M_C]

2025 National Health Interview Survey (NHIS) Questionnaire

PMD: Prescription medications

Question ID: PMD.0030.00.1 Variable: RXDG12M_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, was there any time when ^SCNAME needed prescription medication, but DID NOT GET IT because of the cost?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

IMM: Immunization

Question ID: IMM.0001.00.1 Variable: FLUINTRO_C Interview Module: Child Content Type: Annual Core

Question Text:

There are currently vaccines available for seasonal influenza and coronavirus or COVID-19. I will first ask you questions about seasonal flu vaccination and then about coronavirus or COVID-19 vaccination.

* Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto SHTFLU12M_C]

2025 National Health Interview Survey (NHIS) Questionnaire

IMM: Immunization

Question ID: IMM.0010.00.1 Variable: SHTFLU12M_C Interview Module: Child Content Type: Annual Core

Question Text:

There are two types of flu vaccinations. One is a shot and the other is a spray, mist, or drop in the nose. During the past 12 months, has ^SCNAME had a flu vaccination?

* **Read if necessary:** *A flu vaccination is usually given in the fall and protects against influenza for the flu season.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto SHTFLUNUM_C]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

IMM: Immunization

Question ID: IMM.0020.00.1 Variable: SHTFLUNUM_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, how many flu vaccinations has ^SCNAME received?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	1 vaccination
2	2 or more vaccinations
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who have had a flu shot in the past 12 months

Skip Instructions:

<1,2> [goto FLUVAC1M_C]
<RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

IMM: Immunization

Question ID: IMM.0030.01.1 Variable: FLUVAC1M_C Interview Module: Child Content Type: Annual Core

Question Text:

* 1 of 2

During what month and year did ^SCNAME receive ^hisher_C most recent flu vaccine?

* Enter month of most recent flu vaccine.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

01	January
02	February
03	March
04	April
05	May
06	June
07	July
08	August
09	September
10	October
11	November
12	December
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 who have had one or more shots in the past 12 months

Skip Instructions:

<1-12,DK> [goto FLUVAC1Y_C]
<RF> if SHTFLUNUM_C=2 [goto FLUVAC2M_C]
else if SHTFLUNUM_C=1 [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

IMM: Immunization

Question ID: IMM.0030.02.1 Variable: FLUVAC1Y_C Interview Module: Child Content Type: Annual Core

Question Text:

* 2 of 2

* Enter year of most recent flu vaccine.

Fills:

Response:

Year	Year
9997	Refused
9999	Don't Know

Universe:

Sample Children 0-17 who have had one or more shots in the past 12 months and gave month/don't know month of flu shot

Skip Instructions:

```
<current year, current year-1,RF,DK> and SHTFLUNUM_C = 2 [goto FLUVAC2M_C]
else [goto next section]
if FLUVAC1M_C and FLUVAC1Y_C = a future date [goto ERR1_FLUVAC1Y_C];
if FLUVAC1M_C and FLUVAC1Y_C = a date prior to birth [goto ERR2_FLUVAC1Y_C];
if FLUVAC1M_C and FLUVAC1Y_C = a date prior to 12 months ago [goto ERR3_FLUVAC1Y_C]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR1_FLUVAC1Y_C	1st flu vaccine in future	{check ERR1_FLUVAC1Y_C} Future date invalid
ERR2_FLUVAC1Y_C	1st flu vaccine before dob	{check ERR2_FLUVAC1Y_C} Date prior to birth
ERR3_FLUVAC1Y_C	1st flu vaccine before 12 mos	{check ERR3_FLUVAC1Y_C} Date before 12 months ago

2025 National Health Interview Survey (NHIS) Questionnaire

IMM: Immunization

Question ID: IMM.0040.01.1 Variable: FLUVAC2M_C Interview Module: Child Content Type: Annual Core

Question Text:

* 1 of 2

During what month and year did ^SCNAME receive the flu vaccine before that one?

* Enter month of the flu vaccine.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

01	January
02	February
03	March
04	April
05	May
06	June
07	July
08	August
09	September
10	October
11	November
12	December
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 who have had two or more flu shots in the past 12 months

Skip Instructions:

<1-12,DK> [goto FLUVAC2Y_C]
<RF> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

IMM: Immunization

Question ID: IMM.0040.02.1 Variable: FLUVAC2Y_C Interview Module: Child Content Type: Annual Core

Question Text:

* 2 of 2

* Enter year of next most recent flu vaccine.

Fills:

Response:

Year	Year
9997	Refused
9999	Don't Know

Universe:

Sample Children 0-17 who have had two or more flu shots and gave month/don't know month of 2nd vaccine dose

Skip Instructions:

<current year, current year-1,RF,DK> [goto next section]
 If FLUVAC2M_C and FLUVAC2Y_C = a date in the future [goto ERR1_FLUVAC2Y_C]
 If FLUVAC2M_C and FLUVAC2Y_C = a date prior to birth [goto ERR2_FLUVAC2Y_C]
 If FLUVAC2M_C and FLUVAC2Y_C = a date prior to 12 months ago [goto ERR3_FLUVAC2Y_C]
 If FLUVAC2M_C and FLUVAC2Y_C = a date more recent than answer given in (FLUVAC1M_C and FLUVA1Y_C) [goto ERR4_FLUVAC2Y_C]

Hard Edit:

Check Text	Check Description	Check Text
ERR3_FLUVAC2Y_C	2nd flu vaccine before 12 mos	{check ERR3_FLUVAC2Y_C} Date before 12 months ago
ERR2_FLUVAC2Y_C	2nd flu vaccine before dob	{check ERR2_FLUVAC2Y_C} Date prior to birth
ERR1_FLUVAC2Y_C	2nd flu vaccine in future	{check ERR1_FLUVAC2Y_C} Future date invalid

Soft Edit:

Check Text	Check Description	Check Text
ERR4_FLUVAC2Y_C	2nd flu vaccine after 1st flu vaccine	{check ERR4_FLUVAC2Y_C} The date entered for the second most recent flu vaccine is after the date of the most recent flu vaccine. Please verify.

2025 National Health Interview Survey (NHIS) Questionnaire

CVV: COVID-19 vaccination

Question ID: CVV.0010.00.3 Variable: SHTCVD192_C Interview Module: Child Content Type: Sponsored Content

Question Text:

The next questions are about coronavirus or COVID-19 vaccination.

During the past 12 months, has ^SCNAME had at least one dose of a COVID-19 vaccination?

***Read if necessary:** COVID-19 vaccines approved for use in the United States are made by Pfizer-BioNTech, also called Comirnaty® (koe-mir'-na-tee), Moderna, also called Spikevax®, and Novavax. Approved vaccines vary by age.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto CVDVAC1M3_C]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

CVV: COVID-19 vaccination

Question ID: CVV.0030.01.3 **Variable:** CVDVAC1M3_C **Interview Module:** Child **Content Type:** Sponsored Content

Question Text:

* 1 of 2

During what month and year did ^SCNAME receive ^hisher_C MOST RECENT COVID-19 vaccination?

* Enter month of most recent COVID-19 vaccination.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

01	January
02	February
03	March
04	April
05	May
06	June
07	July
08	August
09	September
10	October
11	November
12	December
97	Refused
99	Don't Know

Universe:

Sample Children who have had one or more COVID-19 vaccinations during the past 12 months

Skip Instructions:

<1-12,DK> [goto CVDVAC1Y3_C]
<RF> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

CVV: COVID-19 vaccination

Question ID: CVV.0030.02.3 Variable: CVDVAC1Y3_C Interview Module: Child Content Type: Sponsored Content

Question Text:

* 2 of 2

* Enter year of most recent COVID-19 vaccination.

Fills:

Response:

2000-2030	Range of values
9997	Refused
9999	Don't Know

Universe:

Sample Children who gave month of most recent COVID-19 vaccination or don't know

Skip Instructions:

```
<valid year,RF,DK> [goto next section]
if CVDVAC1M3_C and CVDVAC1Y3_C = a future date [goto ERR1_CVDVAC1Y3_C];
if CVDVAC1M3_C and CVDVAC1Y3_C = a date before birth [goto ERR2_CVDVAC1Y3_C];
if CVDVAC1M3_C and CVDVAC1Y3_C = a date before 12 months ago [goto ERR3_CVDVAC1Y3_C]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR2_CVDVAC1Y3_C	Most recent COVID-19 vaccination before DOB	{check ERR2_CVDVAC1Y3_C} Date prior to birth. Please correct.
ERR1_CVDVAC1Y3_C	Most recent COVID-19 vaccination in future	{check ERR1_CVDVAC1Y3_C} Future date invalid. Please correct.
ERR3_CVDVAC1Y3_C	Most recent COVID-19 vaccination is prior to 12 months ago	{check ERR3_CVDVAC1Y3_C} Date before 12 months ago. Please correct.

2025 National Health Interview Survey (NHIS) Questionnaire

PTC: Physical and other therapeutic care

Question ID: PTC.0010.00.2 Variable: EYEEX12M_C Interview Module: Child Content Type: Rotating Core

Question Text:

During the past 12 months, has ^SCNAME had an eye exam from an eye specialist such as an optometrist, ophthalmologist, or eye doctor?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,2,RF,DK> [goto THERA12M_C]

2025 National Health Interview Survey (NHIS) Questionnaire

PTC: Physical and other therapeutic care

Question ID: PTC.0020.00.2 Variable: THERA12M_C Interview Module: Child Content Type: Rotating Core

Question Text:

During the past 12 months, did ^SCNAME receive physical therapy, speech therapy, rehabilitative therapy, or occupational therapy?

* **Read if necessary:** *Do not include mental health therapy.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,2,RF,DK> [goto HOMEHC12M_C]

2025 National Health Interview Survey (NHIS) Questionnaire

PTC: Physical and other therapeutic care

Question ID: PTC.0030.00.2 Variable: HOMEHC12M_C Interview Module: Child Content Type: Rotating Core

Question Text:

During the past 12 months, did ^SCNAME receive care at home from a nurse or other health professional?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

MHC: Mental health care

Question ID: MHC.0010.00.1 Variable: MHRX_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, did ^SCNAME take any prescription medication to help with ^hisher_C emotions, concentration, behavior or mental health?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1,2,RF,DK> [goto MHTHRPY_C]

2025 National Health Interview Survey (NHIS) Questionnaire

MHC: Mental health care

Question ID: MHC.0020.00.1 Variable: MHTHRPY_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, did ^SCNAME receive counseling or therapy from a mental health professional such as a psychiatrist, psychologist, psychiatric nurse, or clinical social worker?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1,2,RF,DK> [goto MHTHDLY_C]

2025 National Health Interview Survey (NHIS) Questionnaire

MHC: Mental health care

Question ID: MHC.0030.00.1 Variable: MHTHDLY_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, has ^SCNAME been DELAYED in getting counseling or therapy from a mental health professional because of the cost?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1,2,RF,DK> [goto MHTHND_C]

2025 National Health Interview Survey (NHIS) Questionnaire

MHC: Mental health care

Question ID: MHC.0040.00.1 Variable: MHTHND_C Interview Module: Child Content Type: Annual Core

Question Text:

During the past 12 months, was there any time when ^SCNAME needed counseling or therapy from a mental health professional, but DID NOT GET IT because of the cost?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 2-17

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0010.00.2 Variable: SDQCOPY_C Interview Module: Child Content Type: Rotating Core

Question Text:

- * The following statements are not to be read to the respondent. They are displayed and included here for legal reasons.
- * The next 25 items contained in SDQ1_C through SDQ25_C as well as 8 impact questions are included in this survey with permission as indicated below.
- * The SDQ questions are copyrighted by Robert Goodman, Ph.D., FRCPSYCH, MRCP. State and local agencies may use these questions without charge and without seeking separate permission provided the wording is not modified, all the questions are retained, and Dr. Goodman's copyright is acknowledged.
- * Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Children 4-17

Skip Instructions:

<1> [goto SDQ1_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0020.00.2 Variable: SDQ1_C Interview Module: Child Content Type: Rotating Core

Question Text:

I am going to read a list of items that describe children. For each item, please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for ^SCNAME DURING THE PAST SIX MONTHS.

^SCNAME is considerate of other people's feelings?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not true
2	Somewhat true
3	Certainly true
7	Refused
9	Don't Know

Universe:

Sample Children 4-17

Skip Instructions:

<1-3,RF,DK> [goto SDQ2_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0030.00.2 Variable: SDQ2_C Interview Module: Child Content Type: Rotating Core

Question Text:

^SCNAME is restless, overactive, cannot stay still for long? Please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for ^SCNAME DURING THE PAST SIX MONTHS.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not true
2	Somewhat true
3	Certainly true
7	Refused
9	Don't Know

Universe:

Sample Children 4-17

Skip Instructions:

<1-3,RF,DK> [goto SDQ3_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0040.00.2 Variable: SDQ3_C Interview Module: Child Content Type: Rotating Core

Question Text:

^SCNAME often complains of headaches, stomach-aches or sickness?

* **Read if necessary:** Please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for ^SCNAME DURING THE PAST SIX MONTHS.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not true
2	Somewhat true
3	Certainly true
7	Refused
9	Don't Know

Universe:

Sample Children 4-17

Skip Instructions:

<1-3,RF,DK> [goto SDQ4_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0050.00.2 Variable: SDQ4_C Interview Module: Child Content Type: Rotating Core

Question Text:

^SCNAME shares readily with other ^TOYSGAMES?

* **Read if necessary:** Please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for ^SCNAME DURING THE PAST SIX MONTHS.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
TOYSGAMES	Description	children; for example, toys, treats, pencils/youth; for example, books, games, food
	Instruction	if AGE=4-10 fill "children; for example, toys, treats, pencils" else if AGE=11-17 fill "youth; for example, books, games, food"

Response:

1	Not true
2	Somewhat true
3	Certainly true
7	Refused
9	Don't Know

Universe:

Sample Children 4-17

Skip Instructions:

<1-3,RF,DK> [goto SDQ5_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0060.00.2 Variable: SDQ5_C Interview Module: Child Content Type: Rotating Core

Question Text:

^SCNAME often loses ^hisher_C temper?

* **Read if necessary:** Please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for ^SCNAME DURING THE PAST SIX MONTHS.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Not true
2	Somewhat true
3	Certainly true
7	Refused
9	Don't Know

Universe:

Sample Children 4-17

Skip Instructions:

<1-3,RF,DK> [goto SDQ6_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0070.00.2 Variable: SDQ6_C Interview Module: Child Content Type: Rotating Core

Question Text:

^SCNAME ^SOLITARY?

* **Read if necessary:** Please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for ^SCNAME DURING THE PAST SIX MONTHS.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
SOLITARY	Description	is rather solitary, prefers to play alone/would rather be alone than with other youth
	Instruction	If AGE=4-10 fill "is rather solitary, prefers to play alone" else if AGE=11-17 fill "would rather be alone than with other youth"

Response:

1	Not true
2	Somewhat true
3	Certainly true
7	Refused
9	Don't Know

Universe:

Sample Children 4-17

Skip Instructions:

<1-3,RF,DK> [goto SDQ7_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0080.00.2 Variable: SDQ7_C Interview Module: Child Content Type: Rotating Core

Question Text:

^SCNAME is generally well behaved, usually does what adults request?

* **Read if necessary:** Please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for ^SCNAME DURING THE PAST SIX MONTHS.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not true
2	Somewhat true
3	Certainly true
7	Refused
9	Don't Know

Universe:

Sample Children 4-17

Skip Instructions:

<1-3,RF,DK> [goto SDQ8_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0090.00.2 Variable: SDQ8_C Interview Module: Child Content Type: Rotating Core

Question Text:

^SCNAME has many worries, or often seems worried?

* **Read if necessary:** Please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for ^SCNAME DURING THE PAST SIX MONTHS.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not true
2	Somewhat true
3	Certainly true
7	Refused
9	Don't Know

Universe:

Sample Children 4-17

Skip Instructions:

<1-3,RF,DK> [goto SDQ9_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0100.00.2 Variable: SDQ9_C Interview Module: Child Content Type: Rotating Core

Question Text:

^SCNAME is helpful if someone is hurt, upset or feeling ill?

* **Read if necessary:** Please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for ^SCNAME DURING THE PAST SIX MONTHS.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not true
2	Somewhat true
3	Certainly true
7	Refused
9	Don't Know

Universe:

Sample Children 4-17

Skip Instructions:

<1-3,RF,DK> [goto SDQ10_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0110.00.2 Variable: SDQ10_C Interview Module: Child Content Type: Rotating Core

Question Text:

^SCNAME is constantly fidgeting or squirming?

* **Read if necessary:** Please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for ^SCNAME DURING THE PAST SIX MONTHS.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not true
2	Somewhat true
3	Certainly true
7	Refused
9	Don't Know

Universe:

Sample Children 4-17

Skip Instructions:

<1-3,RF,DK> [goto SDQ11_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0120.00.2 Variable: SDQ11_C Interview Module: Child Content Type: Rotating Core

Question Text:

^SCNAME has at least one good friend?

* **Read if necessary:** Please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for ^SCNAME DURING THE PAST SIX MONTHS.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not true
2	Somewhat true
3	Certainly true
7	Refused
9	Don't Know

Universe:

Sample Children 4-17

Skip Instructions:

<1-3,RF,DK> [goto SDQ12_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0130.00.2 Variable: SDQ12_C Interview Module: Child Content Type: Rotating Core

Question Text:

^SCNAME often fights with other ^childyouth or bullies them?

* **Read if necessary:** Please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for ^SCNAME DURING THE PAST SIX MONTHS.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
childyouth	Description	children/youth
	Instruction	If AGE=4-10 fill "children" else if AGE 11-17 fill "youth"

Response:

1	Not true
2	Somewhat true
3	Certainly true
7	Refused
9	Don't Know

Universe:

Sample Children 4-17

Skip Instructions:

<1-3,RF,DK> [goto SDQ13_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0140.00.2 Variable: SDQ13_C Interview Module: Child Content Type: Rotating Core

Question Text:

^SCNAME is often unhappy, depressed or tearful?

* **Read if necessary:** Please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for ^SCNAME DURING THE PAST SIX MONTHS.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not true
2	Somewhat true
3	Certainly true
7	Refused
9	Don't Know

Universe:

Sample Children 4-17

Skip Instructions:

<1-3,RF,DK> [goto SDQ14_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0150.00.2 Variable: SDQ14_C Interview Module: Child Content Type: Rotating Core

Question Text:

^SCNAME is generally liked by other ^childyouth?

* **Read if necessary:** Please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for ^SCNAME DURING THE PAST SIX MONTHS.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
childyouth	Description	children/youth
	Instruction	If AGE=4-10 fill "children" else if AGE 11-17 fill "youth"

Response:

1	Not true
2	Somewhat true
3	Certainly true
7	Refused
9	Don't Know

Universe:

Sample Children 4-17

Skip Instructions:

<1-3,RF,DK> [goto SDQ15_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0160.00.2 Variable: SDQ15_C Interview Module: Child Content Type: Rotating Core

Question Text:

^SCNAME is easily distracted, ^his/her_C concentration wanders?

* **Read if necessary:** Please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for ^SCNAME DURING THE PAST SIX MONTHS.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
his/her_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Not true
2	Somewhat true
3	Certainly true
7	Refused
9	Don't Know

Universe:

Sample Children 4-17

Skip Instructions:

<1-3,RF,DK> [goto SDQ16_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0170.00.2 Variable: SDQ16_C Interview Module: Child Content Type: Rotating Core

Question Text:

^SCNAME is nervous ^CLINGY in new situations, ^heshe_C easily lose^s confidence?

* **Read if necessary:** Please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for ^SCNAME DURING THE PAST SIX MONTHS.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
CLINGY	Description	or clingy
	Instruction	If AGE=4-10 fill "or clingy"
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"
s	Description	s
	Instruction	if SEX_FINAL[PX_C]=1,2 fill "s" else fill blank

Response:

1	Not true
2	Somewhat true
3	Certainly true
7	Refused
9	Don't Know

Universe:

Sample Children 4-17

Skip Instructions:

<1-3,RF,DK> [goto SDQ17_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0180.00.2 Variable: SDQ17_C Interview Module: Child Content Type: Rotating Core

Question Text:

^SCNAME is kind to younger children?

* **Read if necessary:** Please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for ^SCNAME DURING THE PAST SIX MONTHS.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not true
2	Somewhat true
3	Certainly true
7	Refused
9	Don't Know

Universe:

Sample Children 4-17

Skip Instructions:

<1-3,RF,DK> [goto SDQ18_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0190.00.2 Variable: SDQ18_C Interview Module: Child Content Type: Rotating Core

Question Text:

^SCNAME often lies or cheats?

* **Read if necessary:** Please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for ^SCNAME DURING THE PAST SIX MONTHS.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not true
2	Somewhat true
3	Certainly true
7	Refused
9	Don't Know

Universe:

Sample Children 4-17

Skip Instructions:

<1-3,RF,DK> [goto SDQ19_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0200.00.2 Variable: SDQ19_C Interview Module: Child Content Type: Rotating Core

Question Text:

^SCNAME is picked on or bullied by other ^childyouth?

* **Read if necessary:** Please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for ^SCNAME DURING THE PAST SIX MONTHS.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
childyouth	Description	children/youth
	Instruction	If AGE=4-10 fill "children" else if AGE 11-17 fill "youth"

Response:

1	Not true
2	Somewhat true
3	Certainly true
7	Refused
9	Don't Know

Universe:

Sample Children 4-17

Skip Instructions:

<1-3,RF,DK> [goto SDQ20_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0210.00.2 Variable: SDQ20_C Interview Module: Child Content Type: Rotating Core

Question Text:

^SCNAME often offers to help others, such as parents, teachers, and ^other children?

* **Read if necessary:** Please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for ^SCNAME DURING THE PAST SIX MONTHS.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
other	Description	other
	Instruction	If AGE=4-10 fill "other"

Response:

1	Not true
2	Somewhat true
3	Certainly true
7	Refused
9	Don't Know

Universe:

Sample Children 4-17

Skip Instructions:

<1-3,RF,DK> [goto SDQ21_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0220.00.2 Variable: SDQ21_C Interview Module: Child Content Type: Rotating Core

Question Text:

^SCNAME thinks things out before acting?

* **Read if necessary:** Please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for ^SCNAME DURING THE PAST SIX MONTHS.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not true
2	Somewhat true
3	Certainly true
7	Refused
9	Don't Know

Universe:

Sample Children 4-17

Skip Instructions:

<1-3,RF,DK> [goto SDQ22_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0230.00.2 Variable: SDQ22_C Interview Module: Child Content Type: Rotating Core

Question Text:

^SCNAME steals from home, school or elsewhere?

* **Read if necessary:** Please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for ^SCNAME DURING THE PAST SIX MONTHS.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not true
2	Somewhat true
3	Certainly true
7	Refused
9	Don't Know

Universe:

Sample Children 4-17

Skip Instructions:

<1-3,RF,DK> [goto SDQ23_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0240.00.2 Variable: SDQ23_C Interview Module: Child Content Type: Rotating Core

Question Text:

^SCNAME gets along better with adults than with other ^childyouth?

* **Read if necessary:** Please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for ^SCNAME DURING THE PAST SIX MONTHS.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
childyouth	Description	children/youth
	Instruction	If AGE=4-10 fill "children" else if AGE 11-17 fill "youth"

Response:

1	Not true
2	Somewhat true
3	Certainly true
7	Refused
9	Don't Know

Universe:

Sample Children 4-17

Skip Instructions:

<1-3,RF,DK> [goto SDQ24_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0250.00.2 Variable: SDQ24_C Interview Module: Child Content Type: Rotating Core

Question Text:

^SCNAME has many fears, is easily scared?

* **Read if necessary:** Please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for ^SCNAME DURING THE PAST SIX MONTHS.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not true
2	Somewhat true
3	Certainly true
7	Refused
9	Don't Know

Universe:

Sample Children 4-17

Skip Instructions:

<1-3,RF,DK> [goto SDQ25_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0260.00.2 Variable: SDQ25_C Interview Module: Child Content Type: Rotating Core

Question Text:

^SCNAME has a good attention span, sees work through to the end?

* **Read if necessary:** Please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for ^SCNAME DURING THE PAST SIX MONTHS.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not true
2	Somewhat true
3	Certainly true
7	Refused
9	Don't Know

Universe:

Sample Children 4-17

Skip Instructions:

<1-3,RF,DK> [goto SDQIMP1_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0270.00.2 Variable: SDQIMP1_C Interview Module: Child Content Type: Rotating Core

Question Text:

Overall, do you think that ^SCNAME has difficulties in one or more of the following areas: emotions, concentration, behavior, or being able to get along with other people? Would you say no difficulties, minor difficulties, definite difficulties, or severe difficulties?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	No - no difficulties
2	Yes - minor difficulties
3	Yes - definite difficulties
4	Yes - severe difficulties
7	Refused
9	Don't Know

Universe:

Sample Children 4-17

Skip Instructions:

<1,RF,DK> [goto next section]
<2,3,4> [goto SDQIMP2_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0280.00.2 Variable: SDQIMP2_C Interview Module: Child Content Type: Rotating Core

Question Text:

How long have these difficulties been present? Would you say less than a month, 1-5 months, 6-12 months, or over a year?

Fills:

Response:

1	Less than a month
2	1-5 months
3	6-12 months
4	Over a year
7	Refused
9	Don't Know

Universe:

Sample Children 4-17 who have had minor, definite or severe difficulties with emotions, concentration, behavior, or being able to get along with other people

Skip Instructions:

<1-4,RF,DK> [goto SDQIMP3_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0290.00.2 Variable: SDQIMP3_C Interview Module: Child Content Type: Rotating Core

Question Text:

Do the difficulties upset or distress ^SCNAME? Would you say not at all, only a little, a medium amount, or a great deal?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Only a little
3	A medium amount
4	A great deal
7	Refused
9	Don't Know

Universe:

Sample Children 4-17 who have had minor, definite or severe difficulties with emotions, concentration, behavior, or being able to get along with other people

Skip Instructions:

<1-4,RF,DK> [goto SDQIMP4_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0300.00.2 Variable: SDQIMP4_C Interview Module: Child Content Type: Rotating Core

Question Text:

Do the difficulties interfere with ^SCNAME's everyday life in the following areas?

...Home life? Would you say not at all, only a little, a medium amount, or a great deal?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Only a little
3	A medium amount
4	A great deal
7	Refused
9	Don't Know

Universe:

Sample Children 4-17 who have had minor, definite or severe difficulties with emotions, concentration, behavior, or being able to get along with other people

Skip Instructions:

<1-4,RF,DK> [goto SDQIMP5_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0310.00.2 Variable: SDQIMP5_C Interview Module: Child Content Type: Rotating Core

Question Text:

* **Read if necessary:** *Do the difficulties interfere with ^SCNAME's everyday life in the following areas?*

...Friendships?

* **Read if necessary:** *Would you say not at all, only a little, a medium amount, or a great deal?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1-4,7,9	

Universe:

Sample Children 4-17 who have had minor, definite or severe difficulties with emotions, concentration, behavior, or being able to get along with other people

Skip Instructions:

<1-4,RF,DK> [goto SDQIMP6_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0320.00.2 Variable: SDQIMP6_C Interview Module: Child Content Type: Rotating Core

Question Text:

* **Read if necessary:** *Do the difficulties interfere with ^SCNAME's everyday life in the following areas?*

...Classroom learning?

* **Read if necessary:** *Would you say not at all, only a little, a medium amount, or a great deal?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Only a little
3	A medium amount
4	A great deal
7	Refused
9	Don't Know

Universe:

Sample Children 4-17 who have had minor, definite or severe difficulties with emotions, concentration, behavior, or being able to get along with other people

Skip Instructions:

<1-4,RF,DK> [goto SDQIMP7_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0330.00.2 Variable: SDQIMP7_C Interview Module: Child Content Type: Rotating Core

Question Text:

* **Read if necessary:** *Do the difficulties interfere with ^SCNAME's everyday life in the following areas?*

...Leisure activities?

* **Read if necessary:** *Would you say not at all, only a little, a medium amount, or a great deal?*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Not at all
2	Only a little
3	A medium amount
4	A great deal
7	Refused
9	Don't Know

Universe:

Sample Children 4-17 who have had minor, definite or severe difficulties with emotions, concentration, behavior, or being able to get along with other people

Skip Instructions:

<1-4,RF,DK> [goto SDQIMP8_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SDQ: Child Mental Health - SDQ Questionnaire

Question ID: SDQ.0340.00.2 Variable: SDQIMP8_C Interview Module: Child Content Type: Rotating Core

Question Text:

Do the difficulties put a burden on you or the family as a whole? Would you say not at all, only a little, a medium amount, or a great deal?

Fills:

Response:

1	Not at all
2	Only a little
3	A medium amount
4	A great deal
7	Refused
9	Don't Know

Universe:

Sample Children 4-17 who have had minor, definite or severe difficulties with emotions, concentration, behavior, or being able to get along with other people

Skip Instructions:

<1-4,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

SLE: Stressful Life Events

Question ID: SLE.0010.00.2 Variable: SLEINTRO_C Interview Module: Child Content Type: Rotating Core

Question Text:

The next set of questions are about events that may have happened during ^SCNAME's life. These things can happen in any family, but some people may feel uncomfortable with these questions. You may skip any questions you do not want to answer.

*Enter '1' to continue.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Enter 1 to Continue

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto VIOLENEV_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SLE: Stressful Life Events

Question ID: SLE.0020.00.2 Variable: VIOLENEV_C Interview Module: Child Content Type: Rotating Core

Question Text:

Has ^SCNAME ever been the victim of violence or witnessed violence in ^hisher_C neighborhood?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,2,RF,DK> [goto JAILEV1_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SLE: Stressful Life Events

Question ID: SLE.0030.00.2 Variable: JAILEV1_C Interview Module: Child Content Type: Rotating Core

Question Text:

Has ^SCNAME ever been separated from a parent or guardian because the parent or guardian went to jail, prison, or a detention center?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,2,RF,DK> [goto MENTDEPEV_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SLE: Stressful Life Events

Question ID: SLE.0040.00.2 Variable: MENTDEPEV_C Interview Module: Child Content Type: Rotating Core

Question Text:

Did ^SCNAME ever live with anyone who was mentally ill or severely depressed?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,2,RF,DK> [goto ALCDRUGEV_C]

2025 National Health Interview Survey (NHIS) Questionnaire

SLE: Stressful Life Events

Question ID: SLE.0050.00.2 Variable: ALCDRUGEV_C Interview Module: Child Content Type: Rotating Core

Question Text:

Did ^SCNAME ever live with anyone who had a problem with alcohol or drugs?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

TBI: Concussions - past 12 months

Question ID: TBI.0010.00.3 Variable: TBIINTR01_C Interview Module: Child Content Type: Sponsored Content

Question Text:

The next questions are about head injuries that may have occurred in the past 12 months. Please think about all head injuries, for example, from playing sports, car accidents, falls, or being hit by something or someone that may have occurred in the past 12 months.

* Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto TBILCDCMG_C]

2025 National Health Interview Survey (NHIS) Questionnaire

TBI: Concussions - past 12 months

Question ID: TBI.0020.00.3 Variable: TBILCDCMG_C Interview Module: Child Content Type: Sponsored Content

Question Text:

During the past 12 months, as a result of a blow or jolt to the head, has ^SCNAME been knocked out or lost consciousness, been dazed or confused, or had a gap in ^hisher_C memory?

* **Read if necessary:** *Please think about all head injuries, for example, from playing sports, car accidents, falls, or being hit by something or someone that may have occurred in the past 12 months.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1,2,RF,DK> [goto TBIHLSBMC_C]

2025 National Health Interview Survey (NHIS) Questionnaire

TBI: Concussions - past 12 months

Question ID: TBI.0030.00.3 Variable: TBIHLSBMC_C Interview Module: Child Content Type: Sponsored Content

Question Text:

During the past 12 months, as a result of a blow or jolt to the head, has ^SCNAME had headaches, sensitivity to light or noise, balance problems, or changes in mood or behavior?

* **Read if necessary:** *Please think about all head injuries, for example, from playing sports, car accidents, falls, or being hit by something or someone that may have occurred in the past 12 months.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

```
<1> [goto TBISPORT_C]
<2,RF,DK> if TBILCDCMG_C=1 [goto TBISPORT_C]
elseif TBILCDCMG_C=2,RF,DK [goto next section]
```


2025 National Health Interview Survey (NHIS) Questionnaire

TBI: Concussions - past 12 months

Question ID: TBI.0040.00.3 Variable: TBISPORT_C Interview Module: Child Content Type: Sponsored Content

Question Text:

^CDCMG_C Was ^SCNAME playing a sport or participating in a physical or recreational activity, such as playing on the playground, biking, or pick-up games, when ^heshe_C experienced any of these blows or jolts to the head?

* **Read if necessary:** Include team or League sports competitions or practices.

* **Read if necessary:** Include organized and non-organized sports.

* **Read if necessary:** A pick-up game is when a group of players get together and spontaneously start a game, like basketball or soccer.

Fills:

CDCMG_C	Description	Think about the blows or jolts to the head that caused ^SCNAME to lose consciousness...
	Instruction	If TBILCDCMG_C=1 and TBIHLSBMC_C=2,RF,DK, fill: "Think about the blows or jolts to the head that caused ^SCNAME to lose consciousness, become dazed or confused, or have a gap in ^hisher_C memory." else no fill
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who experienced TBI symptoms from a blow or jolt to the head over the past 12 months

Skip Instructions:

<1> [goto TBILEAGUE_C]
<2,RF,DK> [goto TBIEVAL_C]

2025 National Health Interview Survey (NHIS) Questionnaire

TBI: Concussions - past 12 months

Question ID: TBI.0050.00.3 Variable: TBILEAGUE_C Interview Module: Child Content Type: Sponsored Content

Question Text:

Was ^SCNAME participating in an organized team or league sports competition or practice when ^heshe_C experienced any of these blows or jolts to the head?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who had a sports or recreational related injury

Skip Instructions:

<1,2,RF,DK> [goto TBIEVAL_C]

2025 National Health Interview Survey (NHIS) Questionnaire

TBI: Concussions - past 12 months

Question ID: TBI.0060.00.3 Variable: TBIEVAL_C Interview Module: Child Content Type: Sponsored Content

Question Text:

During the past 12 months, as a result of a blow or jolt to the head, was ^SCNAME evalauted for a concussion or brain injury by a doctor, nurse, paramedic, athletic trainer, or other health professional?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who experienced TBI symptoms from a blow or jolt to the head over the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0010.00.3 **Variable:** VSLVYR1_C **Interview Module:** Child **Content Type:** Sponsored Content

Question Text:

These next questions are about problems with ^SCNAME's voice, swallowing, speech, or language.

During the past 12 months, did ^SCNAME have problems or difficulty with ^hisher_C VOICE, such as having a hoarse, raspy, tired, or strained voice, or trouble speaking loud enough to be heard?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 3-17

Skip Instructions:

<1> [goto VSLVDYS_C]
<2,RF,DK> [goto VSLSWYR_C]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0020.00.3 **Variable:** VSLVDYS_C **Interview Module:** Child **Content Type:** Sponsored Content

Question Text:

During the past 12 months, about how many days, weeks, or months did ^heshe_C have problems or difficulty with ^hisher_C voice?

** Do not read categories unless the respondent says they don't know, at which time you can read the wording in parentheses.*

Fills:

heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	1 to 6 days ("less than a week")
2	7 to 13 days ("one week or more, but less than two weeks")
3	14 to 29 days ("2 weeks or more, but less than a month")
4	30 to 89 days ("a month or more, but less than 3 months")
5	90 days to 179 days ("3 months or more, but less than 6 months")
6	180 days or more ("6 months or more")
7	Refused
9	Don't Know

Universe:

Sample Children 3-17 who had a voice problem in the past 12 months

Skip Instructions:

<1-6,RF,DK> [goto VSLVDIF_C]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0030.00.3 **Variable:** VSLVDIF_C **Interview Module:** Child **Content Type:** Sponsored Content

Question Text:

During the past 12 months, how much difficulty did ^heshe_C have with ^hisher_C voice? Would you say a little, a lot, or somewhere in between?

Fills:

heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	A little
2	A lot
3	Somewhere in between
7	Refused
9	Don't Know

Universe:

Sample Children 3-17 who had a voice problem in the past 12 months

Skip Instructions:

<1-3,RF,DK> [goto VSLSWYR_C]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0040.00.3 **Variable:** VSLSWYR_C **Interview Module:** Child **Content Type:** Sponsored Content

Question Text:

During the past 12 months, did ^SCNAME have problems or difficulty with SWALLOWING, such as having difficulty eating solid food, taking pills, or drinking liquids?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 3-17

Skip Instructions:

<1> [goto VSLSWDYS_C]
<2,RF,DK> [goto VSLSPYR_C]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0050.00.3 **Variable:** VSLSWDYS_C **Interview Module:** Child **Content Type:** Sponsored Content

Question Text:

During the past 12 months, about how many days, weeks, or months did ^heshe_C have problems or difficulty with swallowing?

* Do not read categories unless the respondent says they don't know, at which time you can read the wording in parentheses.

Fills:

heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	1 to 6 days ("less than a week")
2	7 to 13 days ("one week or more, but less than two weeks")
3	14 to 29 days ("2 weeks or more, but less than a month")
4	30 to 89 days ("a month or more, but less than 3 months")
5	90 days to 179 days ("3 months or more, but less than 6 months")
6	180 days or more ("6 months or more")
7	Refused
9	Don't Know

Universe:

Sample Children 3-17 who had a swallowing problem in the past 12 months

Skip Instructions:

<1-6,RF,DK> [goto VSLSWDIF_C]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0060.00.3 **Variable:** VSLSWDIF_C **Interview Module:** Child **Content Type:** Sponsored Content

Question Text:

During the past 12 months, how much difficulty did ^heshe_C have with swallowing? Would you say a little, a lot, or somewhere in between?

Fills:

heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	A little
2	A lot
3	Somewhere in between
7	Refused
9	Don't Know

Universe:

Sample Children 3-17 who had a swallowing problem in the past 12 months

Skip Instructions:

<1-3,RF,DK> [goto VSLSPYR_C]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0070.00.3 **Variable:** VSLSPYR_C **Interview Module:** Child **Content Type:** Sponsored Content

Question Text:

During the past 12 months, did ^SCNAME have problems or difficulty with ^hisher_C SPEECH, such as stuttering, repeating words, or not being able to pronounce words correctly?

* **Read if necessary:** *This refers to the language ^heshe_C is most comfortable with, not a second or third language.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 3-17

Skip Instructions:

<1> [goto VSLSPDYS_C]
<2,RF,DK> [goto VSLLGYR_C]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0080.00.3 **Variable:** VSLSPDYS_C **Interview Module:** Child **Content Type:** Sponsored Content

Question Text:

During the past 12 months, about how many days, weeks, or months did ^heshe_C have problems or difficulty with ^hisher_C speech?

*** Do not read categories unless the respondent says they don't know, at which time you can read the wording in parentheses.**

Fills:

heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	1 to 6 days ("less than a week")
2	7 to 13 days ("one week or more, but less than two weeks")
3	14 to 29 days ("2 weeks or more, but less than a month")
4	30 to 89 days ("a month or more, but less than 3 months")
5	90 days to 179 days ("3 months or more, but less than 6 months")
6	180 days or more ("6 months or more")
7	Refused
9	Don't Know

Universe:

Sample Children 3-17 who had a speech problem in the past 12 months

Skip Instructions:

<1-6,RF,DK> [goto VSLSPDIF_C]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0090.00.3 **Variable:** VSLSPDIF_C **Interview Module:** Child **Content Type:** Sponsored Content

Question Text:

During the past 12 months, how much difficulty did ^heshe_C have with ^hisher_C speech? Would you say a little, a lot, or somewhere in between?

Fills:

heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	A little
2	A lot
3	Somewhere in between
7	Refused
9	Don't Know

Universe:

Sample Children 3-17 who had a speech problem in the past 12 months

Skip Instructions:

<1-3,RF,DK> [goto VSLSPST_C]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0100.00.3 **Variable:** VSLSPST_C **Interview Module:** Child **Content Type:** Sponsored Content

Question Text:

During the past 12 months, did ^SCNAME's speech problems or difficulty include stuttering, trouble pronouncing words correctly, or both?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Stuttering
2	Trouble pronouncing words correctly
3	Both
7	Refused
9	Don't Know

Universe:

Sample Children 3-17 who had a speech problem in the past 12 months

Skip Instructions:

<1-3,RF,DK> [goto VSLGYSR_C]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0110.00.3 **Variable:** VSLLGYR_C **Interview Module:** Child **Content Type:** Sponsored Content

Question Text:

During the past 12 months, did ^SCNAME have problems or difficulty with LANGUAGE, such as difficulty using, learning, or understanding words, sentences, or conversational interactions?

* **Read if necessary:** *This refers to the language ^heshe_C is most comfortable with, not a second or third language.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 3-17

Skip Instructions:

<1> [goto VSLLGDYS_C]
<2,RF,DK> if VSLVYR1_C=1 or VSLSWYR_C=1 or VSLSPYR_C=1 [goto VSLBRAIN_C]
else [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0120.00.3 **Variable:** VSLGDIS_C **Interview Module:** Child **Content Type:** Sponsored Content

Question Text:

During the past 12 months, about how many days, weeks, or months did ^heshe_C have problems or difficulty with language?

** Do not read categories unless the respondent says they don't know, at which time you can read the wording in parentheses.*

Fills:

heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	1 to 6 days ("less than a week")
2	7 to 13 days ("one week or more, but less than two weeks")
3	14 to 29 days ("2 weeks or more, but less than a month")
4	30 to 89 days ("a month or more, but less than 3 months")
5	90 days to 179 days ("3 months or more, but less than 6 months")
6	180 days or more ("6 months or more")
7	Refused
9	Don't Know

Universe:

Sample Children 3-17 who had a language problem in the past 12 months

Skip Instructions:

<1-6,RF,DK> [goto VSLGDIS_C]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0130.00.3 **Variable:** VSLGDIIF_C **Interview Module:** Child **Content Type:** Sponsored Content

Question Text:

During the past 12 months, how much difficulty did ^heshe_C have with language? Would you say a little, a lot, or somewhere in between?

Fills:

heshe_C	Description	He/She/They
	Instruction	If SEX_FINAL_C=1 fill "He" else if SEX_FINAL_C=2 fill "She" elseif SEX_FINAL_C =blank: fill "They"

Response:

1	A little
2	A lot
3	Somewhere in between
7	Refused
9	Don't Know

Universe:

Sample Children 3-17 who had a language problem in the past 12 months

Skip Instructions:

<1-3,RF,DK> [goto VSLBRAIN_C]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0140.00.3 **Variable:** VSLBRAIN_C **Interview Module:** Child **Content Type:** Sponsored Content

Question Text:

Did any of ^SCNAME's ^VSLTYPE_C problems or difficulty follow a head or brain injury?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
VSLTYPE_C	Description	VSL problems experienced in the past 12 months
	Instruction	IF VSLVYR1_C=1 AND VSLSWYR_C=1 AND VSLSPYR_C=1 AND VSLGYSR_C=1, fill: "voice, swallowing, speech, and language" ELSEIF VSLSWYR_C=1 AND VSLSPYR_C=1 AND VSLGYSR_C=1, fill: "swallowing, speech, and language" ELSEIF VSLVYR1_C=1 AND VSLSPYR_C=1 AND VSLGYSR_C=1, fill: "voice, speech, and language" ELSEIF VSLVYR1_C=1 AND VSLSWYR_C=1 AND VSLGYSR_C=1, fill: "voice, swallowing, and language" ELSEIF VSLVYR1_C=1 AND VSLSWYR_C=1 AND VSLSPYR_C=1, fill: "voice, swallowing, and speech" ELSEIF VSLVYR1_C=1 AND VSLSWYR_C=1, fill: "voice and swallowing" ELSEIF VSLVYR1_C=1 AND VSLSPYR_C=1, fill: "voice and speech" ELSEIF VSLVYR1_C=1 AND VSLGYSR_C=1, fill: "voice and language" ELSEIF VSLSWYR_C=1 AND VSLSPYR_C=1, fill: "swallowing and speech" ELSEIF VSLSWYR_C=1 AND VSLGYSR_C=1, fill: "swallowing and language" ELSEIF VSLSPYR_C=1 AND VSLGYSR_C=1, fill: "speech and language" ELSEIF VSLVYR1_C=1, fill: "voice" ELSEIF VSLSWYR_C=1, fill: "swallowing" ELSEIF VSLSPYR_C=1, fill: "speech" ELSEIF VSLGYSR_C=1, fill: "language"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 3-17 who had a voice, swallowing, speech, or language problem in the past 12 months

Skip Instructions:

<1,2,RF,DK> [goto VSLPA_C]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0150.00.3 **Variable:** VSLPA_C **Interview Module:** Child **Content Type:** Sponsored Content

Question Text:

During the past 12 months, did ^SCNAME see a speech-language pathologist, doctor, or other health care professional for evaluation, treatment, or rehabilitation services of ^hisher_C ^VSLTYPE_C problems or difficulty?

** **Read if necessary:** Health care professionals can include early intervention specialists, ENT doctors, otolaryngologists, audiologists, rehabilitation specialists, occupational or physical therapists, internal medicine doctors, neurologists, gerontologists, and others.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
VSLTYPE_C	Description	VSL problems experienced in the past 12 months
	Instruction	IF VSLVYR1_C=1 AND VLSWYR_C=1 AND VSLSPYR_C=1 AND VSLGYZR_C=1, fill: "voice, swallowing, speech, and language" ELSEIF VLSWYR_C=1 AND VSLSPYR_C=1 AND VSLGYZR_C=1, fill: "swallowing, speech, and language" ELSEIF VSLVYR1_C=1 AND VSLSPYR_C=1 AND VSLGYZR_C=1, fill: "voice, speech, and language" ELSEIF VSLVYR1_C=1 AND VLSWYR_C=1 AND VSLGYZR_C=1, fill: "voice, swallowing, and language" ELSEIF VSLVYR1_C=1 AND VLSWYR_C=1 AND VSLSPYR_C=1, fill: "voice, swallowing, and speech" ELSEIF VSLVYR1_C=1 AND VLSWYR_C=1, fill: "voice and swallowing" ELSEIF VSLVYR1_C=1 AND VSLSPYR_C=1, fill: "voice and speech" ELSEIF VSLVYR1_C=1 AND VSLGYZR_C=1, fill: "voice and language" ELSEIF VLSWYR_C=1 AND VSLSPYR_C=1, fill: "swallowing and speech" ELSEIF VLSWYR_C=1 AND VSLGYZR_C=1, fill: "swallowing and language" ELSEIF VSLSPYR_C=1 AND VSLGYZR_C=1, fill: "speech and language" ELSEIF VSLVYR1_C=1, fill: "voice" ELSEIF VLSWYR_C=1, fill: "swallowing" ELSEIF VSLSPYR_C=1, fill: "speech" ELSEIF VSLGYZR_C=1, fill: "language"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 3-17 who had a voice, swallowing, speech, or language problem in the past 12 months

Skip Instructions:

<1> [goto VSLPALF_C]
<2,RF,DK> [goto VSLBTWR_C]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0160.00.3 **Variable:** VSLPALF_C **Interview Module:** Child **Content Type:** Sponsored Content

Question Text:

How did those evaluation, treatment, or rehabilitation services affect ^hisher_C life as a whole? Has ^hisher_C life improved greatly, improved somewhat, stayed the same, or gotten worse?

Fills:

hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Improved greatly
2	Improved somewhat
3	Stayed the same
4	Gotten worse
7	Refused
9	Don't Know

Universe:

Sample Children 3-17 saw a speech-language pathologist or doctor for treatment

Skip Instructions:

<1-4,RF,DK> [goto VSLBTWR_C]

2025 National Health Interview Survey (NHIS) Questionnaire
VSL: Voice, Swallowing, Speech, and Language Communication Disorders

Question ID: VSL.0170.00.3 **Variable:** VSLBTWR_C **Interview Module:** Child **Content Type:** Sponsored Content

Question Text:

During the past 12 months, did ^hisher_C problems or difficulty with ^VSLTYPE_C get a lot better, get a little better, stay the same, get a little worse, or get a lot worse?

Fills:

hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"
VSLTYPE_C	Description	VSL problems experienced in the past 12 months
	Instruction	IF VSLVYR1_C=1 AND VSLSWYR_C=1 AND VSLSPYR_C=1 AND VSLGYSR_C=1, fill: "voice, swallowing, speech, and language" ELSEIF VSLSWYR_C=1 AND VSLSPYR_C=1 AND VSLGYSR_C=1, fill: "swallowing, speech, and language" ELSEIF VSLVYR1_C=1 AND VSLSPYR_C=1 AND VSLGYSR_C=1, fill: "voice, speech, and language" ELSEIF VSLVYR1_C=1 AND VSLSWYR_C=1 AND VSLGYSR_C=1, fill: "voice, swallowing, and language" ELSEIF VSLVYR1_C=1 AND VSLSWYR_C=1 AND VSLSPYR_C=1, fill: "voice, swallowing, and speech" ELSEIF VSLVYR1_C=1 AND VSLSWYR_C=1, fill: "voice and swallowing" ELSEIF VSLVYR1_C=1 AND VSLSPYR_C=1, fill: "voice and speech" ELSEIF VSLVYR1_C=1 AND VSLGYSR_C=1, fill: "voice and language" ELSEIF VSLSWYR_C=1 AND VSLSPYR_C=1, fill: "swallowing and speech" ELSEIF VSLSWYR_C=1 AND VSLGYSR_C=1, fill: "swallowing and language" ELSEIF VSLSPYR_C=1 AND VSLGYSR_C=1, fill: "speech and language" ELSEIF VSLVYR1_C=1, fill: "voice" ELSEIF VSLSWYR_C=1, fill: "swallowing" ELSEIF VSLSPYR_C=1, fill: "speech" ELSEIF VSLGYSR_C=1, fill: "language"

Response:

1	Get a lot better
2	Get a little better
3	Stay the same
4	Get a little worse
5	Get a lot worse

7	Refused
9	Don't Know

Universe:

Sample Children 3-17 who had a voice, speech, swallowing, or language problem in the past 12 months

Skip Instructions:

<1-5,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0010.00.1 Variable: PARINTRO_C Interview Module: Child Content Type: Annual Core

Question Text:

Now I'm going to ask questions about ^SCNAME's parents living here.

* Enter '1' to continue.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Enter 1 to Continue

Universe:

Sample Children 0-17 with at least one resident parent who is a biological, adoptive, or step parent.

Skip Instructions:

<1> [goto tblPARREL]

2025 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0030.00.1 Variable: RELCHPAR_C Interview Module: Child Content Type: Annual Core

Question Text:

^AreyouIspar ^SCNAME's biological, adoptive, or step ^fathermother?

Fills:

AreyouIspar	Description	Are you/Is {Value of ALIAS}
	Instruction	If PX=LNO_SCRESP, fill: "Are you" else fill: "Is ALIAS[PX]"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
fathermother	Description	father/mother/parent
	Instruction	If GEN.SEX_FINAL[PX]='1', fill: "father" If GEN.SEX_FINAL[PX]='2', fill: "mother" If GEN.SEX_FINAL[PX]='('DK','RF')', fill: "parent"

Response:

1	Biological
2	Adoptive
3	Step
4	Other
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 with at least one resident parent who is a biological, adoptive, or step parent.

Skip Instructions:

<1-4,RF,DK> if last parent in GEN.PARENTS_FINAL[PX_C].NONFOST_FINAL [goto MARINTRO_C if any parent in GEN.PARENTS_FINAL[PX_C].PARENTS_FINAL has MAR_FLG_A ne 1]

else [goto tblPARBORN.bParent.PARBORN_C for first parent in GEN.PARENTS_FINAL [PX_C].PARENTS_FINAL where Adult.NAT.NATUSBORN_A=empty]

else [goto next section]

else [goto RELCHPAR_C for next parent listed at GEN.PARENTS_FINAL[PX_C].NONFOST_FINAL]

****Note: update skip instructions to tblPARBORN****

2025 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0040.00.1 Variable: MARINTRO_C Interview Module: Child Content Type: Annual Core

Question Text:

The next set of questions are about marriage and cohabitation.

* Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

At least one parent has marital flag of 3 or blank, or at least one parent has marital flag of 2 and the parent is the sample adult and not the sample child respondent

Skip Instructions:

For the first parent in GEN.PARENTS_FINAL[PX_C].PARENTS_FINAL with GEN.MAR_FLG_A ne 1,
If GEN.MAR_FLG_A=blank or (GEN.MAR_FLG_A=2 and PX=PX_A and SARESPSC_FLG ne 1) [goto
tb1MAR.bParent.MARITAL_C]
Elseif GEN.MAR_FLG_A=3 [goto tb1MAR.bPARENT.EVRMARRIED_C]

2025 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0090.00.1 Variable: MARITAL_C Interview Module: Child Content Type: Annual Core

Question Text:

^AreyouIspar married, living with a partner together as an unmarried couple, or neither?

Fills:

AreyouIspar	Description	Are you/Is {Value of ALIAS}
	Instruction	If PX=LNO_SCRESP, fill: "Are you" else fill: "Is ALIAS[PX]"

Response:

1	Married
2	Living with a partner together as an unmarried couple
3	Neither
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 where parent's marital status is not determined in the Sample Adult section
OR the parent's marital status is don't know or refused in the Sample adult section and the
parent is the sample adult but not the sample child respondent OR the parent's marital status
has not been obtained in this block

Skip Instructions:

<1> [goto SPOUSLIV_C]
<2> if GEN.PCNT16PLUSNOSC=1 [got ERR1_MARITAL_C] else [goto PARTNERWHO_C]
<3,RF,DK> [goto EVRMARRIED_C]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_MARITAL_C	One person eligible to be living with a partner in household soft edit	{signal ERR1_MARITAL_C} Respondent is the only person 16 or older on the household roster. There is no one else eligible to select.

2025 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0100.00.1 Variable: SPOUSLIV_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^yourPARspouse currently live in the household?

Fills:

yourPARspouse	Description	your spouse/{Value of ALIAS}'s spouse
	Instruction	if PX=LNO_SCRESP, fill: "your spouse" else fill: "ALIAS[PX]'s spouse"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 where one parent is married

Skip Instructions:

```
<1> if GEN.PCNT16PLUSNOSC=1 [goto ERR1_SPOUSLIV_C] else [goto SPOUSWHO_C]
<2> [goto SPOUSEP_C]
<RF,DK> loop through table for remaining parents else [goto tb1PARBORN.bParent.PARBORN_C for
first parent in GEN.PARENTS_FINAL[PX_C].PARENTS_FINAL where Adult.NAT.NATUSBORN_A=empty] else
[goto next section]]
```

2025 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0110.00.1 Variable: SPOUSEP_C Interview Module: Child Content Type: Annual Core

Question Text:

Does ^yourPAR spouse not live here because ^youPAR and ^yourPAR spouse are legally separated?

Fills:

yourPAR	Description	your/{Value of ALIAS}'s
	Instruction	If PX=LNO_SCRESP, fill: "your" else fill ALIAS[PX] + " 's "
youPAR	Description	you/{Value of ALIAS}
	Instruction	If PX=LNO_SCRESP, fill: "you" else fill "ALIAS[PX]"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample children 0-17 where parent is married and their spouse doesn't live in the household

Skip Instructions:

<1,2,RF,DK> loop through table for remaining parents else [goto tblPARBORN.bParent.PARBORN_C
for first parent in GEN.PARENTS_FINAL[PX_C].PARENTS_FINAL where Adult.NAT.NATUSBORN_A=empty]
else [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0120.00.1 Variable: SPOUSWHO_C Interview Module: Child Content Type: Annual Core

Question Text:

Which person is ^yourPAR spouse?

* Enter line number of spouse.

* Deleted persons cannot be selected. Enter '0' if respondent wishes to select a deleted person.

Fills:

yourPAR	Description	your/{Value of ALIAS}'s
	Instruction	If PX=LNO_SCRESP, fill: "your" else fill ALIAS[PX] + " 's "

Response:

Universe:

Sample Children 0-17 where parent is married and spouse lives in the household

Skip Instructions:

```
<1-25> if MARITAL_C=3 "Neither" for person selected at SPOUSWHO_C [goto ERR1_SPOUSWHO_C]
{person selected at SPOUSWHO_C has conflicting answer of "Neither" married or living with a
partner at MARITAL_C}

elseif SPOUSLIV_C=2 "Outside household" for person selected at SPOUSWHO_C [goto ERR2_SPOUSWHO_C]
{person selected at SPOUSWHO_C has conflicting answer of married with a spouse living outside
the household at SPOUSLIV_C}

elseif person selected at SPOUSWHO_C ((was already selected previously at SPOUSWHO_C or
PARTNERWHO_C) or (already chose a spouse/partner)) [goto ERR3_SPOUSWHO_C]
{person selected at SPOUSWHO_C is already indicated as married to someone else/a partner of
someone else}

else if GEN.SEX_FINAL[SPOUSWHO_C] IN('1','2') and GEN.SEX_FINAL[PX] IN ('1','2') [goto
SPOUSSEX_C]
else loop through table for remaining parents
else [goto tblPARBORN.bParent.PARBORN_C for first parent in GEN.PARENTS_FINAL
[PX_C].PARENTS_FINAL where Adult.NAT.NATUSBORN_A=empty]
else [goto next section]

<0,RF,DK> loop through table for remaining parents
else [goto tblPARBORN.bParent.PARBORN_C for first parent in GEN.PARENTS_FINAL
[PX_C].PARENTS_FINAL where Adult.NAT.NATUSBORN_A=empty]
else [goto next section]
```

Soft Edit:

Check Text	Check Description	Check Text
ERR1_SPOUSWHO_C	Person selected has conflicting answer of "Neither" married or living with a partner	{signal ERR1_SPOUSWHO_C} Person selected also has answer of "Neither" married or living together as an unmarried couple. Please correct.

ERR2_SPOUSWHO_C	Person selected has conflicting answer of married with a spouse living outside the household	{signal ERR2_SPOUSWHO_C} Person selected was indicated to have a spouse living outside the household. Please correct.
ERR3_SPOUSWHO_C	Person selected is already indicated as married to/a partner of someone else	{signal ERR3_SPOUSWHO_C} Person selected is already indicated as ^marriedpartner someone else. Please correct.

2025 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0130.00.1 Variable: SPOUSSEX_C Interview Module: Child Content Type: Annual Core

Question Text:

I have previously recorded that ^ParentX ^sex_ParentX and that ^fillSPOUSWHO_C ^sex_SPOUSWHO_C.
Is that correct?

Fills:

ParentX	Description	you are/{Value of ALIAS} is
	Instruction	If PX=LNO_SCRESP, fill: "you are" else fill: "ALIAS[PX] is"
sex_ParentX	Description	male/female
	Instruction	If SEX[PX]=1, fill: "male" If SEX[PX]=2, fill: "female"
fillSPOUSWHO_C	Description	you are/{Value of ALIAS} is
	Instruction	If SPOUSWHO_C=LNO_SCRESP, fill: "you are" else fill "ALIAS[SPOUSWHO_C] is"
sex_SPOUSWHO_C	Description	male/female
	Instruction	If SEX[SPOUSWHO_C]=1 fill: "male" If SEX[SPOUSWHO_C]=2 fill: "female"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 where parent is married and spouse lives in the household and the sex of the residential parent of interest is not refused/don't know and the sex of the spouse of this parent is not refused/don't know

Skip Instructions:

<1,RF,DK> loop through table for remaining parents else [goto tblPARBORN.bParent.PARBORN_C for first parent in GEN.PARENTS_FINAL[PX_C].PARENTS_FINAL where Adult.NAT.NATUSBORN_A=empty] else [goto next section]
<2> [goto FIXSPOUSSEX_C]

2025 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0140.00.1 Variable: FIXSPOUSSEX_C Interview Module: Child Content Type: Annual Core

Question Text:

Which was not correct?

* Enter all that apply, separate with commas.

Fills:

Response:

Universe:

Sample Children 0-17 where parent is married and spouse lives in the household and the sex of the residential parent of interest is not refused/don't know and the sex of the spouse of this parent is not refused/don't know, and the sex of one or both individuals was incorrect

Skip Instructions:

<1-25> loop through table for remaining parents else [goto tblPARBORN.bParent.PARBORN_C for first parent in GEN.PARENTS_FINAL[PX_C].PARENTS_FINAL where Adult.NAT.NATUSBORN_A=empty] else [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0150.00.1 Variable: PARTNERWHO_C Interview Module: Child Content Type: Annual Core

Question Text:

Which person is ^yourPAR partner?

* Enter line number of partner.

* Deleted persons cannot be selected. Enter '0' if respondent wishes to select a deleted person.

Fills:

yourPAR	Description	your/{Value of ALIAS}'s
	Instruction	If PX=LNO_SCRESP, fill: "your" else fill ALIAS[PX] + " 's "

Response:

Universe:

Sample Children 0-17 where parent is cohabitating with a partner and there are at least two people eligible to be cohabitating in the household

Skip Instructions:

```
<1-25> if MARITAL_C=3 "Neither" for person selected at PARTNERWHO_C [goto ERR1_PARTNERWHO_C]
{person selected at PARTNERWHO_C has conflicting answer of "Neither" married or living with a
partner at MARITAL_C}

elseif SPOUSLIV_C=2 "Outside household" for person selected at PARTNERWHO_C [goto
ERR2_PARTNERWHO_C]
{person selected at PARTNERWHO_C has conflicting answer of married with a spouse living outside
the household at SPOUSLIV_C}

elseif person selected at PARTNERWHO_C ((was already selected previously at SPOUSWHO_C or
PARTNERWHO_C) or (already chose a spouse/partner)) [goto ERR3_PARTNERWHO_C]
{person selected at PARTNERWHO_C is already indicated as married to someone else/a partner of
someone else}

elseif GEN.SEX_FINAL[PX] IN ('1','2') and GEN.SEX_FINAL[PARTNERWHO_C] IN ('1','2')[goto
PARTNERSEX_C]
else [goto EVRMARRIED_C]

<0,RF,DK> [goto EVRMARRIED_C]
```

Soft Edit:

Check Text	Check Description	Check Text
ERR1_PARTNERWHO_C	Person selected has conflicting answer of "Neither" married or living with a partner	{signal ERR1_PARTNERWHO_C} Person selected also has answer of "Neither" married or living together as an unmarried couple. Please correct.
ERR2_PARTNERWHO_C	Person selected has conflicting answer of married with a spouse living outside the household	{signal ERR2_PARTNERWHO_C} Person selected was indicated to have a spouse living outside the household. Please correct.

ERR3_PARTNERWHO_C	Person selected is already indicated as married to/a partner of someone else	{signal ERR3_PARTNERWHO_C} Person selected is already indicated as ^marriedpartner someone else. Please correct.

2025 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0160.00.1 Variable: PARTNERSEX_C Interview Module: Child Content Type: Annual Core

Question Text:

I have previously recorded that ^ParentX ^sex_ParentX and that ^fillPARTNERWHO_C ^sex_PARTNERWHO_C. Is that correct?

Fills:

ParentX	Description	you are/{Value of ALIAS} is
	Instruction	If PX=LNO_SCRESP, fill: "you are" else fill: "ALIAS[PX] is"
sex_ParentX	Description	male/female
	Instruction	If SEX[PX]=1, fill: "male" If SEX[PX]=2, fill: "female"
fillPARTNERWHO_C	Description	you are/{Value of ALIAS} is
	Instruction	If PARTNERWHO_C=LNO_SCRESP, fill: "you are" else fill "ALIAS[PARTNERWHO_C] is"
sex_PARTNERWHO_C	Description	male/female
	Instruction	If GEN.SEX_FINAL[PARTNERWHO_C]=1 fill: "male" If GEN.SEX_FINAL[PARTNERWHO_C]=2 fill: "female"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 where parent is cohabitating with a partner and the partner lives in the household and the sex for the residential parent is not refused or don't know and the sex for the partner is not refused or don't know

Skip Instructions:

<1,RF,DK> [goto EVRMARRIED_C]
<2> [goto FIXPARTSEX_C]

2025 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0170.00.1 Variable: FIXPARTSEX_C Interview Module: Child Content Type: Annual Core

Question Text:

Which was not correct?

* Enter all that apply, separate with commas.

Fills:

Response:

Universe:

Sample Children 0-17 where parent is cohabitating with a partner and the partner lives in the household and the sex for the residential parent is not refused/don't and the sex for the partner is not refused/don't know, and the sex of one or both of the individuals is incorrect.

Skip Instructions:

<1-25> [goto EVRMARRIED_C]

2025 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0180.00.1 Variable: EVRMARRIED_C Interview Module: Child Content Type: Annual Core

Question Text:

^HaveyouHasPAR ever been married?

Fills:

HaveyouHasPAR	Description	Have you/Has {Value of ALIAS}
	Instruction	If PX=LNO_SCRESP, fill: "Have you" else, fill: "Has ALIAS[PX]"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 where parent is either cohabitating or not in relationship with anyone else in the household, or the marriage/cohabitation status is refused/don't know in the Adult section or the parent is reported as cohabitating with another parent

Skip Instructions:

```
<1> if (MARITAL_C=2 or GEN.PAR_FLG_C[PX]=3 or GEN.MAR_FLG_A[PX]=3) [goto LEGALSTAT_A]
elseif MARITAL_C=3 [goto WIDIVSEP_A]
else loop through table for remaining parents else [goto tblPARBORN.bParent.PARBORN_C for first
parent in GEN.PARENTS_FINAL[PX_C].PARENTS_FINAL where Adult.NAT.NATUSBORN_A=empty] else [goto
next section]
<2,RF,DK> loop through table for remaining parents else [goto tblPARBORN.bParent.PARBORN_C for
first parent in GEN.PARENTS_FINAL[PX_C].PARENTS_FINAL where Adult.NAT.NATUSBORN_A=empty] else
[goto next section]
```

2025 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0190.00.1 Variable: LEGALSTAT_C Interview Module: Child Content Type: Annual Core

Question Text:

What is ^yourPAR current legal marital status?

Fills:

yourPAR	Description	your/{Value of ALIAS}'s
	Instruction	If PX=LNO_SCRESP, fill: "your" else fill ALIAS[PX] + " 's "

Response:

1	Married
2	Widowed
3	Divorced
4	Separated
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 where parent has been married and is living with a partner or person selected as a cohabitating partner in PAR or person selected as a cohabitating partner in MAR

Skip Instructions:

<1-4,RF,DK> loop through table for remaining parents else [goto tblPARBORN.bParent.PARBORN_C for first parent in GEN.PARENTS_FINAL[PX_C].PARENTS_FINAL where Adult.NAT.NATUSBORN_A=empty]
else [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0200.00.1 Variable: WIDIVSEP_C Interview Module: Child Content Type: Annual Core

Question Text:

^Are you Ispar widowed, divorced, or separated?

Fills:

Are you Ispar	Description	Are you/Is {Value of ALIAS}
	Instruction	If PX=LNO_SCRESP, fill: "Are you" else fill: "Is ALIAS[PX]"

Response:

1	Widowed
2	Divorced
3	Separated
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 where parent is neither living with a partner nor married, but has been married

Skip Instructions:

<1-3,RF,DK> loop through table for remaining parents else [goto FINISH_MAR_C]

2025 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0210.00.1 Variable: FINISH_MAR_C Interview Module: Child Content Type: Annual Core

Question Text:

* The Sample Child MAR section is now complete.

* Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Skip Instructions:

<1> [goto tblPARBORN.bParent.PARBORN_C for first parent in GEN.PARENTS_FINAL[PX_C].PARENTS where
Adult.NAT.NATUSBORN_A=empty]
else [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: PAR.0230.00.1 Variable: PARBORN_C Interview Module: Child Content Type: Annual Core

Question Text:

^WereyouWaspar born in the United States or a U.S. territory?

Fills:

WereyouWaspar	Description	Were you/Was {Value of ALIAS}
	Instruction	If PX=LNO_SCRESP, fill: "Were you" else fill: "Was ALIAS[PX]"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 where whether the parent was born in the US or US territory is unknown

Skip Instructions:

<1,2,RF,DK> loop through table for remaining parents else [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

PAR: Parent Demographics

Question ID: REL.0030.00.1 Variable: FOSTPAR Interview Module: Child Content Type: Annual Core

Question Text:

Is ^ALIASNAME currently in foster care? By that I mean is there an adult living in this household acting as a foster parent to ^ALIASNAME under the supervision of a state or county child welfare agency?

Fills:

ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Child has no parents identified

Skip Instructions:

<1> [goto WHOFOST]
 <2,RF,DK> If last non-deleted child on roster [goto next section]
 else [goto WHOPAR for next non-deleted child on roster]

2025 National Health Interview Survey (NHIS) Questionnaire

NAT: Nativity

Question ID: NAT.0010.00.1 Variable: NATUSBORN_C Interview Module: Child Content Type: Annual Core

Question Text:

Was ^SCNAME born in the United States or a U.S. territory?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto NATSTBORN_C]
<2> [goto NATUSYR_C]
<RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

NAT: Nativity

Question ID: NAT.0020.00.1 Variable: NATSTBORN_C Interview Module: Child Content Type: Annual Core

Question Text:

In what state or U.S. territory was ^SCNAME born?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

AK	Alaska
AL	Alabama
AZ	Arizona
AR	Arkansas
CA	California
CO	Colorado
CT	Connecticut
DE	Delaware
DC	District of Columbia
FL	Florida
GA	Georgia
GU	Guam
HI	Hawaii
ID	Idaho
IL	Illinois
IN	Indiana
IA	Iowa
KS	Kansas
KY	Kentucky
LA	Louisiana
ME	Maine
MD	Maryland
MA	Massachusetts
MI	Michigan
MN	Minnesota
MS	Mississippi
MO	Missouri
MT	Montana

NV	Nevada
NH	New Hampshire
NJ	New Jersey
NM	New Mexico
NY	New York
NC	North Carolina
ND	North Dakota
OH	Ohio
OK	Oklahoma
OR	Oregon
PA	Pennsylvania
PR	Puerto Rico
RI	Rhode Island
SC	South Carolina
SD	South Dakota
TN	Tennessee
TX	Texas
UT	Utah
VT	Vermont
VA	Virginia
VI	U.S. Virgin Islands
WA	Washington
WV	West Virginia
WI	Wisconsin
WY	Wyoming
AS	American Samoa
MP	Northern Mariana Islands
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 born in the United States or U.S. territory

Skip Instructions:

```
<American Samoa> [goto CITIZEN_C]
else [goto next section]
```

2025 National Health Interview Survey (NHIS) Questionnaire

NAT: Nativity

Question ID: NAT.0040.00.1 Variable: NATUSYR_C Interview Module: Child Content Type: Annual Core

Question Text:

In what year did ^SCNAME come to the United States to stay?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Year	Year
9997	Refused
9999	Don't Know

Universe:

Sample Children 0-17 not born in the United States or U.S. territory

Skip Instructions:

```
<2000-Current Year,RF,DK>
if NATUSYR_C gt current year [goto ERR1_NATUSYR_C]
if NATUSYR_C lt VFY.BYEAR_C [goto ERR2_NATUSYR_C]
else [goto CITIZEN_C]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR1_NATUSYR_C	The year reported in NATUSYR_C is a year in the future	{check ERR1_NATUSYR_C} Future year invalid. Please correct.
ERR2_NATUSYR_C	The year reported in NATUSYR_C is a year prior to child's birth	{check ERR2_NATUSYR_C} Year is prior to date of birth. Please correct.

2025 National Health Interview Survey (NHIS) Questionnaire

NAT: Nativity

Question ID: NAT.0050.00.1 Variable: CITIZEN_C Interview Module: Child Content Type: Annual Core

Question Text:

Is ^SCNAME a citizen of the United States?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample children 0-17 not born in the United States or U.S. territory or born in American Samoa

Skip Instructions:

<1> [goto NATCTZN_C]
<2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

NAT: Nativity

Question ID: NAT.0060.00.1 Variable: NATCTZN_C Interview Module: Child Content Type: Annual Core

Question Text:

Was ^SCNAME born abroad to an American parent, born abroad and adopted by an American parent, or did ^SCNAME become a U.S. citizen by naturalization?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Born abroad to American parent
2	Born abroad and adopted by an American parent
3	Became U.S. citizen by naturalization
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 are United States citizens

Skip Instructions:

<1-3,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

FEM: Employment of family members

Question ID: FEM.0010.00.1 Variable: FEMINTRO_C Interview Module: Child Content Type: Annual Core

Question Text:

Now I have a few questions about ^youandothfam.

* Enter '1' to continue.

Fills:

youandothfam	Description	you/other members of your family/you and other members of your family
	Instruction	<pre> IF LNO_SCRESP NE PX_A OR (LNO_SCRESP = PX_A AND ((SARESPSC_FLG NE 1 AND EMP_FLG_A=2) OR (EMP_FLG_A = EMPTY)))THEN fill: "you" ENDIF IF PCNT18UP_C >= 2 THEN IF fill = EMPTY THEN fill: "other members of your family" ELSEIF (PCNT18UP_C = 2 AND ((SAMEFAM_FLG NE 1) OR (SAMEFAM_FLG = 1) AND ((SARESPSC_FLG NE 1 AND EMP_FLG_A=2) OR (EMP_FLG_A = EMPTY)))) OR (PCNT18UP_C > 2)THEN fill: "you and other members of your family" ENDIF ENDIF </pre>

Response:

1	Enter 1 to Continue

Universe:

Sample Child is not in the same family as the Sample Adult
OR
Sample Child is in same family as Sample Adult and there is one adult in family who is the Sample Adult and the Sample Adult Employment section has not been asked
OR
Sample Child is in the same family as Sample Adult and there are more than one adults in the family and the Sample Adult FEM section has not been asked
OR
Sample Child is in the same family as Sample Adult and there are more than one adults in the family and the Sample Adult FEM section was asked but has don't know/refused responses for all questions and the sample adult isn't the sample child respondent.

Skip Instructions:

[goto tblFEM_C]

Replicate To:

FEMINTRO_A

2025 National Health Interview Survey (NHIS) Questionnaire

FEM: Employment of family members

Question ID: FEM.0030.00.1 Variable: FEMWORK_C Interview Module: Child Content Type: Annual Core

Question Text:

^DoesDoyouALIASNAME work for pay at a job or business?

* If the respondent says ^heshetheywork, but not for pay, at a family-owned job or business, enter '1' for yes.

Fills:

DoesDoyouALIASNAME	Description	Do you/Does ^ALIASNAME
	Instruction	If PX=LNO_SCRESP, fill: "Do you" (that is if the subject of the question is the sample child respondent, fill: "Do you") else fill: "Does ^ALIASNAME"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]
heshetheywork	Description	he works/she works/they work
	Instruction	elseif GEN.SEX_FINAL=1 fill "he works" elseif GEN.SEX_FINAL=2 fill "she works" elseif GEN.SEX_FINAL IN (RF,DK) fill "they work"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

(Sample Child is not in the same family as the Sample Adult
OR
Sample Child is in same family as Sample Adult and there is one adult in family who is the Sample Adult and the Sample Adult Employment section has not been asked
OR
Sample Child is in the same family as Sample Adult and there are more than one adults in the family and the Sample Adult FEM section has not been asked
OR
Sample Child is in the same family as Sample Adult and there are more than one adults in the family and the Sample Adult FEM section was asked but has don't know/refused responses for all questions and the sample adult isn't the sample child respondent.)
AND
Person is in Sample Child's family and over the age of 18

Skip Instructions:

<1> [goto FEMWKFT_C]
<2,RF,DK> if there is another adult in the family [goto FEMWORK_C] for the next adult 18+
else [goto next section]

Replicate To:

FEMWORK_A

2025 National Health Interview Survey (NHIS) Questionnaire

FEM: Employment of family members

Question ID: FEM.0040.00.1 Variable: FEMWKFT_C Interview Module: Child Content Type: Annual Core

Question Text:

^DoesDoyouALIASNAME usually work 35 hours or more per week in total at ^hisheryour job or jobs?

Fills:

DoesDoyouALIASNAME	Description	Do you/Does ^ALIASNAME
	Instruction	If PX=LNO_SCRESP, fill: "Do you" (that is if the subject of the question is the sample child respondent, fill: "Do you") else fill: "Does ^ALIASNAME"
ALIASNAME	Description	{Value of ALIAS}
	Instruction	Fill value from Roster.HHC.ALIAS[PX]
hisheryour	Description	your/his/her/their
	Instruction	If PX=LNO_SCRESP, fill: "your" (that is, if the subject of the question is the sample child respondent, fill: "your") else if SEX_FINAL[PX] = 1, fill "his" else if SEX_FINAL[PX] = 2, fill "her" else if SEX_FINAL[PX] in (DK,RF), fill "their"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

(Sample Child is not in the same family as the Sample Adult
OR
Sample Child is in same family as Sample Adult and there is one adult in family who is the Sample Adult and the Sample Adult Employment section has not been asked
OR
Sample Child is in the same family as Sample Adult and there are more than one adults in the family and the Sample Adult FEM section has not been asked
OR
Sample Child is in the same family as Sample Adult and there are more than one adults in the family and the Sample Adult FEM section was asked but has don't know/refused responses for all questions and the sample adult isn't the sample child respondent.)
AND
Person is in Sample Child's family and over the age of 18
AND
The adult in question works for pay at a job or business

Skip Instructions:

<1,2,RF,DK> if another adult in the family [goto FEMWORK_C] for the next adult 18+
else [goto next section]

Replicate To:

FEMWKFT_A

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0010.00.1 Variable: INCINTRO_C Interview Module: Child Content Type: Annual Core

Question Text:

The next questions are about your total family income in ^LASTYEAR BEFORE TAXES. Based on questions asked earlier, we have that ^SCNAME's family consists of ^INCINTRO_C_fill.

* **Read if necessary:** *Income is important in analyzing the health information we collect. For example, with this information, we can learn whether persons in one income group use certain types of medical services more or less often than those in another group. Please be assured that, like all other information you have provided, these answers will remain confidential.*

* **Enter '1' to continue.**

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
INCINTRO_C_fill	Description	List of people in Sample Child's family including SC
	Instruction	For all people with FAMC_REL_FLG =1 OR (SAME_REL_FLG=1 for SC and tblRelate_SA.bPerson.RELATE in (1-13,DK,RF)) OR (FAMA_REL_FLG=1 and 1st person in SC's family has tblRelate_SA.bPerson.RELATE in (1-13,DK,RF), fill with their names. Description: Person was identified as being in the SC's family at WHOPAR/WHOFOST OR (Sample Child is related to the Sample Adult and person on roster was placed in Sample Adult's family based on answer provided at RELATE), include their name as part of the list of SC's family. Include sample child on the list. If Household Respondent (Roster.HHC.HHRESPAVAIL) is on list of names, fill "you" for name and place name at the beginning of the list. Include the word "and" before the last name on the list.

Response:

1	Enter 1 to Continue

Universe:

Sample Children 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused

Skip Instructions:

<1> [goto INCWRKO_C]

Replicate To:

INCINTRO_A

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0020.00.1 Variable: INCWRKO_C Interview Module: Child Content Type: Annual Core

Question Text:

In ^LASTYEAR, did ^YOUFAM18YRS_C receive income from wages, salaries, commissions, bonuses, tips, or self-employment?

* **Read if necessary:** For the purpose of this survey, ^SCNAME's family includes ^FAMVERSC_fill

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
YOUFAM18YRS_C	Description	you/you or any family members 18 or older
	Instruction	If GEN.PCNT18UP_C=1 fill "you" else if GEN.PCNT18UP_C GT 1 fill "you or any family members 18 or older"
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
FAMVERSC_fill	Description	List of all people in Sample Child's family
	Instruction	Loop through all persons on roster and add to list of names if FAMILYC_flg = 1 Do not include Sample Child on list. If Household Respondent (Roster.HHC.HHRESPAVAIL) is on list of names, fill "you" for name and place name at the beginning of the list. If only one person on the list of names and person ne Roster.HHC.HHRESPAVAIL, follow list with "is". If more than one person on the list or only one person on list and person is Household Respondent (Roster.HHC.HHRESPAVAIL), follow list with "are".

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused

Skip Instructions:

<1,2,RF,DK> [goto INCINTER_C]

Replicate To:

INCWRKO_A

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0030.00.1 Variable: INCINTER_C Interview Module: Child Content Type: Annual Core

Question Text:

In ^LASTYEAR, did ANY FAMILY MEMBERS receive income from interest-bearing accounts or investments, dividends from stocks or mutual funds, net rental income, royalty income, or income from estates and trusts?

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused

Skip Instructions:

<1,2,RF,DK> [goto INCSSRR_C]

Replicate To:

INCINTER_A

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0031.00.1 Variable: INCSSRR_C Interview Module: Child Content Type: Annual Core

Question Text:

* **Read if necessary:** In ^LASTYEAR, did ^YOUFAMHERE_C receive...

Income from Social Security or Railroad Retirement?

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
YOUFAMHERE_C	Description	you/you or any family members
	Instruction	If GEN.PCNT_C=2 fill "you" else if GEN.PCNT_C GT 2 fill "you or any family members"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused and both the income from wages and income from accounts questions have not been refused

Skip Instructions:

<1,2,RF,DK> [goto INCSSISSDI_C]

Replicate To:

INCSSRR_A

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0040.00.1 Variable: INCSSISSDI_C Interview Module: Child Content Type: Annual Core

Question Text:

* **Read if necessary:** In ^LASTYEAR, did ANY FAMILY MEMBERS receive...

Supplemental Security Income, SSI, or Social Security Disability Income, SSDI, which are different from Social Security?

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused and both the income from wages and income from accounts questions have not been refusedv

Skip Instructions:

<1> [goto SSISDIBTH_C]
<2,RF,DK> [goto INCWELF_C]

Replicate To:

INCSSISSDI_A

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0050.00.1 Variable: SSISDIBTH_C Interview Module: Child Content Type: Annual Core

Question Text:

Was this Supplemental Security Income, SSI, Social Security Disability Income, SSDI, or both?

Fills:

Response:

1	SSI
2	SSDI
3	Both SSI and SSDI
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 where someone in the family gets SSI or SSDI and
Sample Child INC section has not been completed OR the Sample Adult and Sample Child are in the
same family and the person who answered the Sample Adult questions is not the Sample Child
respondent and every question asked in the Sample Adult income section was don't know or refused
OR the Sample Adult and Sample Child are not in the same family

Skip Instructions:

<1-3,RF,DK> [goto SSISDIDSB_C]

Replicate To:

SSISDIBTH_A

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0060.00.1 Variable: SSISSDIDSB_C Interview Module: Child Content Type: Annual Core

Question Text:

Was this received as a disability benefit?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 living in families where someone in the family gets SSI or SSDI and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and Sample Child are in the same family and the person who answered the Sample Adult questions is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused

Skip Instructions:

<1> [goto SSISSDIP_C]
<2,RF,DK> [goto INCWELF_C]

Replicate To:

SSISSDIDSB_A

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0070.00.1 Variable: SSISSDIP_C Interview Module: Child Content Type: Annual Core

Question Text:

In ^LASTYEAR, who received this disability benefit?

* **Read if necessary:** Do NOT include a benefit received on behalf of someone else.

* **Enter all that apply, separate with commas.**

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year

Response:

00	Not on roster
01-25	Person Number
97	Refused
99	Don't Know

Universe:

Sample Children 0-17 with more than one person in the family where someone in the family gets SSI or SSDI and SSI/SSDI was received as a disability benefit and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and Sample Child are in the same family and the person who answered the Sample Adult questions is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused

Skip Instructions:

<1-25,RF,DK> [goto INCWELF_C]

Replicate To:

SSISSDIP_A

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0090.00.1 Variable: INCWELF_C Interview Module: Child Content Type: Annual Core

Question Text:

In ^LASTYEAR, did ^YOUFAMHERE_C receive...

Any public assistance or welfare payments from the state or local welfare office?

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
YOUFAMHERE_C	Description	you/you or any family members
	Instruction	If GEN.PCNT_C=2 fill "you" else if GEN.PCNT_C GT 2 fill "you or any family members"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused and both the income from wages and income from accounts questions have not been refused

Skip Instructions:

<1,2,RF,DK> [goto INCRETIRE_C]

Replicate To:

INCWELF_A

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0100.00.1 Variable: INCRETIRE_C Interview Module: Child Content Type: Annual Core

Question Text:

* **Read if necessary:** In ^LASTYEAR, did ^YOUFAMHERE_C receive...

Income from retirement, survivor, or disability pensions?

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
YOUFAMHERE_C	Description	you/you or any family members
	Instruction	If GEN.PCNT_C=2 fill "you" else if GEN.PCNT_C GT 2 fill "you or any family members"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused and both the income from wages and income from accounts questions have not been refused

Skip Instructions:

<1,2,RF,DK> [goto INCOTHR_C]

Replicate To:

INCRETIRE_A

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0110.00.1 Variable: INCOTHR_C Interview Module: Child Content Type: Annual Core

Question Text:

* **Read if necessary:** In ^LASTYEAR, did ^YOUFAMHERE_C receive...

Any other sources of income such as VA payments from the Veterans Benefits Administration, unemployment compensation, child support, or alimony?

Fills:

LASTYEAR	Description	Last year
	Instruction	Fill year prior to current year
YOUFAMHERE_C	Description	you/you or any family members
	Instruction	If GEN.PCNT_C=2 fill "you" else if GEN.PCNT_C GT 2 fill "you or any family members"

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused and both the income from wages and income from accounts questions have not been refused

Skip Instructions:

<1,2,RF,DK> [goto INCTOTAL_C]

Replicate To:

INCOTHR_A

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0120.00.1 Variable: INCTOTAL_C Interview Module: Child Content Type: Annual Core

Question Text:

When answering this next question, please remember to include your income PLUS the income of all family members living in this household.

What is your best estimate of the total income of all family members from all sources, before taxes, in the last calendar year?

* Enter '999995' if the reported income is \$999,995 or greater.

Fills:

Response:

000000-999995	Range of values
999997	Refused
999999	Don't Know

Universe:

Sample Children 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused and both the income from wages and income from accounts questions have not been refused

Skip Instructions:

<0-999> [goto ERR1_INCTOTAL_C]
 <250001-999995> [goto ERR2_INCTOTAL_C]
 <1000-250000> [goto next section]
 <RF,DK> [goto INC250PCT_C]

Soft Edit:

Check Text	Check Description	Check Text
ERR1_INCTOTAL_C	Income low soft edit	{signal ERR1_INCTOTAL_C} Do not read to the respondent. ^INCTOTAL_C is unusually low. Make corrections if necessary.
ERR2_INCTOTAL_C	Income high soft edit	{signal ERR2_INCTOTAL_C} Do not read to the respondent. ^INCTOTAL_C is unusually high. Make corrections if necessary.

Replicate To:

INCTOTAL_A

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0140.01.1 Variable: INC250PCT_C Interview Module: Child Content Type: Annual Core

Question Text:

Was your total family income from all sources less than ^250POVERTY_C or ^250POVERTY_C or more?

Fills:

250POVERTY_C	Description	250% of poverty threshold
	Instruction	Fill value stored in Child.INC.INC250PCT_C

Response:

1	Less than ^250POVERTY_C
2	^250POVERTY_C or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who don't know or refuse the total family income and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused

Skip Instructions:

```
<1> [goto INC138PCT_C]
<2> if GEN.PCNT_C=2 and AGE of both persons is le 65 [goto INC75K_C]
elseif GEN.PCNT_C=2 and AGE of at least 1 person gt 65 or GEN.PCNT_C=4 [goto INC100K_C]
elseif GEN.PCNT_C IN (3,5,6,7,8,9+) [goto INC400PCT_C]
<RF,DK> [goto next section]
```

Replicate To:

INC250PCT_A

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0150.01.1 Variable: INC138PCT_C Interview Module: Child Content Type: Annual Core

Question Text:

Was your total family income from all sources less than ^138POVERTY_C or ^138POVERTY_C or more?

Fills:

138POVERTY_C	Description	138% of poverty threshold
	Instruction	Fill value stored in Child.INC.INC138PCT_C

Response:

1	Less than ^138POVERTY_C
2	^138POVERTY_C or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 answered less than 250% of poverty threshold and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused

Skip Instructions:

<1> [goto INC100PCT_C]
<2> [goto INC200PCT_C]
<RF,DK> [goto next section]

Replicate To:

INC138PCT_A

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0160.01.1 Variable: INC100PCT_C Interview Module: Child Content Type: Annual Core

Question Text:

Was your total family income from all sources less than ^100POVERTY_C or ^100POVERTY_C or more?

Fills:

100POVERTY_C	Description	100% of poverty threshold
	Instruction	Fill value stored in Child.INC.INC100PCT_C

Response:

1	Less than ^100POVERTY_C
2	^100POVERTY_C or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who answered less than 138% of poverty threshold and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused

Skip Instructions:

<1,2,RF,DK> [goto next section]

Replicate To:

INC100PCT_A

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0170.01.1 Variable: INC200PCT_C Interview Module: Child Content Type: Annual Core

Question Text:

Was your total family income from all sources less than ^200POVERTY_C or ^200POVERTY_C or more?

Fills:

200POVERTY_C	Description	200% of poverty threshold
	Instruction	Fill value stored in Child.INC.INC200PCT_C

Response:

1	Less than ^200POVERTY_C
2	^200POVERTY_C or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who answered 138% of poverty or more and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused

Skip Instructions:

<1> if GEN.PCNT_C=8 [goto INC100K_C]
else [goto next section]
<2,RF,DK> [goto next section]

Replicate To:

INC200PCT_A

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0180.00.1 Variable: INC75K_C Interview Module: Child Content Type: Annual Core

Question Text:

Was your total family income from all sources less than \$75,000 or \$75,000 or more?

Fills:

Response:

1	Less than \$75,000
2	\$75,000 or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who answered 250% of poverty threshold or more and are from a 2-person family and all are 65 or younger and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused

Skip Instructions:

<1> [goto next section]
<2> [goto INC100K_C]
<RF,DK> [goto next section]

Replicate To:

INC75K_A

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0190.00.1 Variable: INC100K_C Interview Module: Child Content Type: Annual Core

Question Text:

Was your total family income from all sources less than \$100,000 or \$100,000 or more?

Fills:

Response:

1	Less than \$100,000
2	\$100,000 or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who answered \$75,000 or more or answered 250% of poverty threshold or more and are from a 2-person family and at least 1 person is greater than 65 or from a 4-person family or answered less than 200% of poverty threshold and are from an 8-person family and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused

Skip Instructions:

```
<1> if GEN.PCNT_C=2 [goto INC400PCT_C]
else [goto next section]
<2> if GEN.PCNT_C=2 [goto INC150K_C]
elseif GEN.PCNT_C=4 [goto INC400PCT_C]
elseif GEN.PCNT_C=8 [goto next section]
<RF,DK> [goto next section]
```

Replicate To:

INC100K_A

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0200.01.1 Variable: INC400PCT_C Interview Module: Child Content Type: Annual Core

Question Text:

Was your total family income from all sources less than ^400POVERTY_C or ^400POVERTY_C or more?

Fills:

400POVERTY_C	Description	400% of poverty threshold
	Instruction	Fill value stored in Child.INC.INC400PCT_C

Response:

1	Less than ^400POVERTY_C
2	^400POVERTY_C or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who answered less than \$100,000 and are from a 2-person family or answered \$100,000 or more and are from a 4-person family or answered 250% of poverty threshold or more and are from a 3 or 5+ person family and
Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused

Skip Instructions:

```
<1> if GEN.PCNT_C IN (6,7) [goto INC150K_C]
else [goto next section]
<2> if GEN.PCNT_C IN (3,4) [goto INC150K_C]
else [goto next section]
<RF,DK> [goto next section]
```

Replicate To:

INC400PCT_A

2025 National Health Interview Survey (NHIS) Questionnaire

INC: Family Income

Question ID: INC.0210.00.1 Variable: INC150K_C Interview Module: Child Content Type: Annual Core

Question Text:

Was your total family income from all sources less than \$150,000 or \$150,000 or more?

Fills:

Response:

1	Less than \$150,000
2	\$150,000 or more
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who answered \$100,000 or more and are from a 2-person family or answered 400% of poverty or more and are from a 3- or 4-person family or answered less than 400% of poverty and are from a 6- or 7-person family and Sample Adult and Sample Child are in the same family and the Sample Adult INC section has not been completed OR the Sample Adult and Sample Child are not in the same family OR the Sample Adult and the Sample Child are in the same family and the Sample Adult is not the Sample Child respondent and every question asked in the Sample Adult income section was don't know or refused

Skip Instructions:

<1,2,RF,DK> [goto next section]

Replicate To:

INC150K_A

2025 National Health Interview Survey (NHIS) Questionnaire

F00: Food Related Programs

Question ID: F00.0010.00.1 Variable: FSNAP12M_C Interview Module: Child Content Type: Annual Core

Question Text:

At any time in the last 12 months did any family members living here receive ^FSSNAPNM?

* **Read if necessary:** *This program puts money on a SNAP EBT card that you can only use to buy food.*

Fills:

FSSNAPNM	Description	food stamp benefits/[state food stamp program name]

	Instruction	If AL then fill "Food Assistance Program or food stamp benefits" If AK then fill "SNAP or food stamp benefits" If AZ then fill "Nutrition Assistance or food stamp benefits" If AR then fill "SNAP or food stamp benefits" If CA then fill "CalFresh or food stamp benefits" If CO then fill "SNAP or food stamp benefits" If CT then fill "SNAP or food stamp benefits" If DE then fill "Food Supplement Program or food stamp benefits" If DC then fill "SNAP or food stamp benefits" If FL then fill "Food Assistance Program or food stamp benefits" If GA then fill "Georgia Food Stamp Program or food stamp benefits" If HI then fill "SNAP or food stamp benefits" If ID then fill "SNAP or food stamp benefits" If IL then fill "SNAP or food stamp benefits" If IN then fill "SNAP or food stamp benefits" If IA then fill "SNAP or food stamp benefits" If KS then fill "Food Assistance Program or food stamp benefits" If KY then fill "SNAP or food stamp benefits" If LA then fill "SNAP or food stamp benefits" If ME then fill "SNAP or food stamp benefits" If MD then fill "SNAP or food stamp benefits" If MA then fill "SNAP or food stamp benefits" If MI then fill "Food Assistance Program (FSP) or food stamp benefits" If MN then fill "SNAP or food stamp benefits" If MS then fill "SNAP or food stamp benefits" If MO then fill "SNAP or food stamp benefits" If MT then fill "SNAP or food stamp benefits" If NE then fill "SNAP or food stamp benefits" If NV then fill "SNAP or food stamp benefits" If NH then fill "SNAP or food stamp benefits" If NJ then fill "SNAP or food stamp benefits" If NM then fill "SNAP or food stamp benefits" If NY then fill "SNAP or food stamp benefits" If NC then fill "Food and Nutrition Services or food stamp benefits" If ND then fill "SNAP or food stamp benefits" If OH then fill "Food Assistance Program or food stamp benefits" If OK then fill "SNAP or food stamp benefits" If OR then fill "SNAP or food stamp benefits" If PA then fill "SNAP or food stamp benefits" If RI then fill "SNAP or food stamp benefits" If SC then fill "SNAP or food stamp benefits" If SD then fill "SNAP or food stamp benefits" If TN then fill "SNAP or food stamp benefits" If TX then fill "SNAP or food stamp benefits" If UT then fill "SNAP or food stamp benefits" If VT then fill "3SquaresVT or food stamp benefits" If VA then fill "SNAP or food stamp benefits" If WA then fill "Basic Food or food stamp benefits" If WV then fill "SNAP or food stamp benefits" If WI then fill "FoodShare or food stamp benefits" If WY then fill "SNAP or food stamp benefits"

Response :

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Child 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult F00 section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family and Sample Adult F00 section was not the Sample Child respondent and this person answered all questions asked in the F00 section with RF or DK.

Skip Instructions:

<1,2,RF,DK> if PCNTF1255_C GE 1 or PCNTC05_C GE 1, [goto FWIC12M_C]
else if PCNTC517_C GE 1 [goto FLUNCH12M1_C]
else [goto FINISH_F00_C]

Replicate To:

FSNAP12M_A

2025 National Health Interview Survey (NHIS) Questionnaire

F00: Food Related Programs

Question ID: F00.0030.00.1 Variable: FWIC12M_C Interview Module: Child Content Type: Annual Core

Question Text:

At any time in the last 12 months did any family members living here receive benefits from the WIC program, that is, the Women, Infants, and Children program?

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 living in families with females 12-55 years of age or children 0-5 years of age and Sample Adult and Sample Child are in the same family and the Sample Adult F00 section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family and Sample Adult F00 section was asked to someone other than the Sample Child respondent and this person answered all questions asked in the F00 section with RF or DK.

Skip Instructions:

<1,2,RF,DK> If PCNTC517_C GE 1 [goto FLUNCH12M1_C]
else [goto FINISH_F00_C]

Replicate To:

FWIC12M_A

2025 National Health Interview Survey (NHIS) Questionnaire

FOO: Food Related Programs

Question ID: F00.0040.00.1 Variable: FLUNCH12M1_C Interview Module: Child Content Type: Annual Core

Question Text:

At any time in the last 12 months, did ^SCCHILDFAM_C receive free or reduced-price breakfasts or lunches at school?

* **Read if necessary:** *The National School Lunch Program and the School Breakfast Program provide cash assistance to states to operate breakfast and lunch programs in schools and residential childcare institutions. The programs provide low-price or free breakfasts and lunches to low-income children in kindergarten through 12th grade.*

Fills:

SCCHILDFAM_C	Description	^SCNAME/any child in your family
	Instruction	if PCNTC517_C=1, fill "^SCNAME", elseif PCNTC517_C gt 1, fill "any child in your family",
SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children living in families with children between the ages of 5-17 and Sample Child are in the same family and the Sample Adult F00 section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family and Sample Adult F00 section was asked to someone other than the Sample Child respondent and this person answered all questions asked in the F00 section with RF or DK.

Skip Instructions:

<1,2,RF,DK> [goto FINISH_F00_C]

Replicate To:

FLUNCH12M1_A

2025 National Health Interview Survey (NHIS) Questionnaire

FOO: Food Related Programs

Question ID: F00.0050.00.1 Variable: FINISH_FOO_C Interview Module: Child Content Type: Annual Core

Question Text:

- * The Sample Child food related programs section is now complete.
- * Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Skip Instructions:

<1> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

HOU: Housing

Question ID: HOU.0010.00.1 Variable: HOUYRSLIV_C Interview Module: Child Content Type: Annual Core

Question Text:

About how long has ^SCNAME lived in this house/apartment?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Less than 1 year
2	1 to 3 years
3	4 to 10 years
4	More than 10 years
7	Refused
9	Don't Know

Universe:

Sample Children 1-17

Skip Instructions:

<1-4,RF,DK> if ((SAMEFAM_FLG=1 and HOU_FLG_A=blank) or (SAMEFAM_FLG ne 1) or (SAMEFAM_FLG=1 and HOU_FLG_A=2 and SARESPSC_FLG ne 1)) [goto HOUTENURE_C]
else [goto next section]

If GEN.AGE_FINAL[PX_C] lt 11 and HOUYRSLIV_C=4 [goto ERR1_HOUYRSLIV_C]

Hard Edit:

Check Text	Check Description	Check Text
ERR1_HOUYRSLIV_C	Hard check when years lived in home exceeds age	{check ERR1_HOUYRSLIV_C} Years in house/apartment exceed child's age. Please correct.

2025 National Health Interview Survey (NHIS) Questionnaire

HOU: Housing

Question ID: HOU.0020.00.1 Variable: HOUTENURE_C Interview Module: Child Content Type: Annual Core

Question Text:

Is this house/apartment owned or rented by you ^SOMEFAM_C?

* If house has a mortgage, record as owned.

Fills:

SOMEFAM_C	Description	or someone in your family
	Instruction	If PCNT_C=2 fill: blank If PCNT_C gt 2 fill: "or someone in your family"

Response:

1	Owned or being bought
2	Rented
3	Other arrangement
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 and Sample Adult and Sample Child are in the same family and the Sample Adult HOU section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family and Sample Adult HOU section was asked to someone other than the Sample Child respondent and this person answered all questions asked in the HOU section with RF or DK.

Skip Instructions:

<1,3,RF,DK> [goto next section]
<2> [got HOUVASST_C]

Replicate To:

HOUTENURE_A

2025 National Health Interview Survey (NHIS) Questionnaire

HOU: Housing

Question ID: HOU.0030.00.1 Variable: HOUGVASST_C Interview Module: Child Content Type: Annual Core

Question Text:

Is anyone in your family paying lower rent because the Federal, State, or local government is paying part of the cost?

** **Read if necessary:** Federal, State, or Local government housing programs for persons with low income may take many forms. Government housing assistance could come from monetary assistance to help pay rent, a program called "Section 8," direct payments to landlords, vouchers, or other types of assistance from a local housing authority. Living in public housing is considered housing assistance from the government.*

Fills:

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 living in a house/apartment that is being rented and Sample Adult and Sample Child are in the same family and the Sample Adult HOU section has not been completed OR the Sample Adult and Sample Child are not in the same family OR Sample Adult and Sample Child are in the same family and Sample Adult HOU section was asked to someone other than the Sample Child respondent and this person answered all questions asked in the HOU section with RF or DK.

Skip Instructions:

<1,2,RF,DK> [goto next section]

Replicate To:

HOUGVASST_A

2025 National Health Interview Survey (NHIS) Questionnaire

REC: Child's full name

Question ID: REC.0010.00.1 Variable: LNKFNAME_C Interview Module: Child Content Type: Annual Core

Question Text:

* **Ask or verify:** What is ^SCNAME's full name?

* **Enter first name.**

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<allow 20,RF,DK> [goto LNKMNAME_C]

2025 National Health Interview Survey (NHIS) Questionnaire

REC: Child's full name

Question ID: REC.0020.00.1 Variable: LNKNAME_C Interview Module: Child Content Type: Annual Core

Question Text:

- * Enter middle name.
- * Press "Enter" to skip to last name if child has no middle name.

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<allow 20,RF,DK> [goto LNKNAME_C]

2025 National Health Interview Survey (NHIS) Questionnaire

REC: Child's full name

Question ID: REC.0030.00.1 Variable: LNKLNNAME_C Interview Module: Child Content Type: Annual Core

Question Text:

* Enter last name.

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<allow 20,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

TEL: Telephone ownership

Question ID: TEL.0010.00.1 **Variable:** TELCURWRK_C **Interview Module:** Child **Content Type:** Annual Core

Question Text:

Is there at least one telephone INSIDE ^SCNAME's home that is currently working and is not a cell phone?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 who live in the same family as a sample adult, where TELCURWRK_A has not be asked
 OR who live in the same family as a sample adult, where TELCURWRK_A was answered don't know or refused and the sample child respondent is not the sample adult
 OR who do not live in the same family as the sample adult

Skip Instructions:

<1,2,RF,DK> [goto PHONELIVE_C]

Replicate To:

TELCURWRK_A

2025 National Health Interview Survey (NHIS) Questionnaire

TEL: Telephone ownership

Question ID: TEL.0020.00.1 **Variable:** PHONELIVE_C **Interview Module:** Child **Content Type:** Annual Core

Question Text:

Does ^SCNAME live with anyone who has a working cell phone?

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample Children 0-17 in a family with at least one other person without working cell phones where Sample Adult does not live in same family as Sample Child or Sample Adult and Sample Child are in the same family but PHONELIVE_A has not been asked OR Sample Adult and Sample Child are in the same family, PHONELIVE_A was answered dk/rf and the Sample Adult is not the Sample Child Respondent.

Skip Instructions:

<1,2,RF,DK> [goto next section]

Replicate To:

PHONELIVE_A

2025 National Health Interview Survey (NHIS) Questionnaire

LNK: Linkage

Question ID: LNK.0010.00.1 Variable: LNKINTRO_C Interview Module: Child Content Type: Annual Core

Question Text:

[F1]

We would like the last four digits of ^SCNAME's Social Security Number. This information will help us link ^hisher_C survey data with other health-related records of other government agencies, and allow us to conduct additional research without taking up your time with more questions. The National Center for Health Statistics (NCHS) uses this information for research purposes only. Providing this information is voluntary. There will be no effect on ^SCNAME's benefits if you do not provide this information. Federal laws authorize us to ask for this information. Like all other answers you have provided, this information will remain confidential.

*** Read if necessary:** The specific federal laws protecting ^SCNAME's privacy and the confidentiality of ^hisher_C data are the Public Health Service Act (Title 42, U.S.C., Section 242m(d)); the Confidential Information Protection and Statistical Efficiency Act or CIPSEA (44 U.S.C. 3561-3583); and the Privacy Act of 1974 (5 U.S.C. § 552a). In addition to the above cited laws, NCHS complies with the Federal Cybersecurity Enhancement Act of 2015 (6 U.S.C. §§ 151 and 151 note) which protects Federal information systems from cybersecurity risks by screening their networks.

*** Read if necessary:** NCHS collects health-related data from other government agencies, including records from Medicare and Medicaid Services, Social Security, housing, and death certificates. If you agree, NCHS will attempt to link records such as these with ^SCNAME's survey data to give a fuller picture of the kinds of things that affect health. NCHS does this linkage. ^SCNAME's name and ^hisher_C information are not given to these agencies.

*** Read if necessary: If asked:** ^SCNAME's data will not be linked

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

1	Enter 1 to Continue

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto SSN4_C]

2025 National Health Interview Survey (NHIS) Questionnaire

LNK: Linkage

Question ID: LNK.0020.00.1 Variable: SSN4_C Interview Module: Child Content Type: Annual Core

Question Text:

[F1]

What are the last four digits of ^SCNAME's Social Security Number?

Read if necessary: Providing this information is voluntary. There will be no effect on ^SCNAME's benefits if you do not provide this information. Federal laws authorize us to ask for this information. Like all other information you have provided, these answers will remain confidential.

Read if asked about specific laws: The specific federal laws protecting ^SCNAME's privacy and the confidentiality of ^hisher_C data are the Public Health Service Act, which is Title 42, U.S.C., Section 242m(d); the Confidential Information Protection and Statistical Efficiency Act or CIPSEA (44 U.S.C. 3561-3583); and the Privacy Act of 1974, which is 5 U.S.C. § 552a. In addition to the above cited laws, NCHS complies with the Federal Cybersecurity Enhancement Act of 2015 (6 U.S.C. §§ 151 and 151 note) which protects Federal information systems from cybersecurity risks by screening their networks.

* Enter 'N' if no Social Security Number.

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1
hisher_C	Description	his/her/their
	Instruction	if GEN.SEX_FINAL[PX_C]=1 fill "his"; else if GEN.SEX_FINAL[PX_C]=2 fill "her"; else if GEN.SEX_FINAL[PX_C] in (blank,DK,RF): fill "their"

Response:

0001-9999	Range of values
N	No Social Security Number
99997	Refused
99999	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

```
if SSN4_C=Adult.LNK.SSN4_A [goto ERR1_SSN4_C]
elseif SSN4_C=000-999 [goto ERR2_SSN4_C]
elseif SSN4_C NOT IN (N,DK,RF,000-999,0001-9999) [goto ERR3_SSN4_C]
<0001-9999> [goto THANKS_C]
<N,RF,DK> [goto RLINK_C]
```

Hard Edit:

Check Text	Check Description	Check Text
ERR2_SSN4_C	Entered less than four digits hard edit	{check ERR2_SSN4_C} You must enter all four of the last four digits of the Social Security Number. Please correct.

ERR3_SSN4_C	SSN last four digits are 0000 or a letter other than N hard edit	{check ERR3_SSN4_C} The last 4 digits of a SSN may be between 0001-9999. For a respondent who does not want to provide the SSN, enter 'Ctrl D' or 'Ctrl R' for 'Don't Know' or 'Refused.' If a respondent does not have a SSN, enter 'N'. Please correct.

Soft Edit:

Check Text	Check Description	Check Text
ERR1_SSN4_C	SA and SC SSN the same soft edit	{signal ERR1_SSN4_C} The last four digits of ^SCNAME's Social Security Number are the same as the last four digits of ^SNAME's Social Security Number. Please verify.

2025 National Health Interview Survey (NHIS) Questionnaire

LNK: Linkage

Question ID: LNK.0030.00.1 Variable: RLINK_C Interview Module: Child Content Type: Annual Core

Question Text:

?[F1]

May we try to link ^SCNAME's survey data without a Social Security Number?

** **Read if necessary:** Any data obtained are protected by strict federal laws, including the Public Health Service Act, which is Title 42, U.S.C., Section 242m(d); the Confidential Information Protection and Statistical Efficiency Act or CIPSEA (44 U.S.C. 3561-3583); and the Privacy Act of 1974, which is 5 U.S.C. § 552a. In addition to the above cited laws, NCHS complies with the Federal Cybersecurity Enhancement Act of 2015 (6 U.S.C. §§ 151 and 151 note) which protects Federal information systems from cybersecurity risks by screening their networks.*

Fills:

SCNAME	Description	Sample child's name
	Instruction	Fill ALIAS of HHSTAT_C=1

Response:

1	Yes
2	No
7	Refused
9	Don't Know

Universe:

Sample child 0-17 where SSN was refused, don't know or not available.

Skip Instructions:

<1,2,RF,DK> [goto next section]

2025 National Health Interview Survey (NHIS) Questionnaire

THX: Thanks

Question ID: THX.0010.00.1 Variable: THANKS_C Interview Module: Child Content Type: Annual Core

Question Text:

* Thank respondent for answering these questions. If there is a Sample Adult interview to complete, ask for appropriate person to respond to these questions.

Enter '1' to continue.

Fills:

Response:

1	Enter 1 to Continue

Universe:

Sample Children 0-17

Skip Instructions:

<1> [goto SCRESP_FNAME]

2025 National Health Interview Survey (NHIS) Questionnaire

THX: Thanks

Question ID: THX.0020.01.1 Variable: SCRESP_FNAME Interview Module: Child Content Type: Annual Core

Question Text:

* **Ask or verify:** In case I or someone from my office needs to get in touch with you, we need your full name. What is your full name?

* **Enter first name.**

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<allow 20,RF,DK> [goto SCRESP_LNAME]

2025 National Health Interview Survey (NHIS) Questionnaire

THX: Thanks

Question ID: THX.0020.02.1 Variable: SCRESP_LNAME Interview Module: Child Content Type: Annual Core

Question Text:

* Enter last name.

Fills:

Response:

Verbatim	Verbatim values
97	Refused
99	Don't Know

Universe:

Sample Children 0-17

Skip Instructions:

<allow 20,RF,DK> [goto next section]

Variable Glossary

NAME	Description
AGE	Age storage variable
AGE_CALC_A	Calculate age based on birth year given
AGE_CALC_C	Calculate age based on birth year given
AGE_CALCMINUS1_A	Calculate younger age if unable to accurately calculate respondent's age due to incomplete DOB
AGE_CALCMINUS1_C	Calculate younger age if unable to accurately calculate SC age due to incomplete DOB
AGE_FINAL	Final storage variable for AGE
AGEDIFF	Difference between parent selected at WHOPAR and child
AGETEMP_A	Temporary storage variable for AGE and NEWAGE
AGETEMP_C	Temporary storage variable for AGE and NEWAGE
ARRANGE_CALLBACK	Summary screen and landing point for parallel tab/F9
AVAIL_A	Sample Adult Available
CASESTATUS	Status display
CB_POSSIBLE	Is a callback possible for this section
CBSTAT_A	Status of Sample Adult callback
CHILDAge	{Value of AGE}/is less than 1
CHILDNAME	{Value of ALIAS}
CHTCM_C	Total height in centimeters
CHTINCH_C	Total height in inches
DOB_COUNT_A	Counter used to loop back to recollect DOB one time
DOB_COUNT_C	Counter used to loop back to recollect DOB one time
FAMILYA_FLG	Identified as being in Sample Adult's family
FAMILYC_FLG	Identified as being in Sample Child's family
FITCOLGCR_FLG_A	Sample Adult FIT or Cologuard is current flag
FOSTPARAGE	{Value of AGE}
FOSTPARNAME	{Value of ALIAS}
FX_REL	Family Number Based on Responses in tblREL
FX_RELATESA	Family Number Based on Responses given in tblREL and tblRELATESA
GICHECK_FLG	GICHECK loop flag
GNIPATH_FLG	Flag that is randomly set to determine the path that will be used in the Adult.GNI block
HHRESPSA_FLG	Sample Adult is the household respondent or the proxy who lives in the household is the household respondent
HHRESPSC_FLG	Sample Child respondent is the household respondent
HHSTAT_D	Indicates person is deleted

HHSTAT_M	Indicates person is active duty military
HOU_FLG_A	Sample Adult HOU completion flag
HOU_FLG_C	Sample Child HOU completion flag
INSPRI_FLG	Sample Adult has private health insurance (but not Medigap) and Sample Child has private health insurance (but not Medigap) flag
INSPRI2_FLG2_A	Sample Child is covered by more than 1 private health insurance plan flag
INSPRI2_FLG2_C	Sample Adult is covered by more than 1 private health insurance plan flag
INSPRI2_FLG3_A	Sample Child is not the policy holder of the second private plan OR Sample Child's first private plan covers others or don't know/refused if it covers others FLAG
INSPRI2_FLG3_C	Sample Adult is not the policy holder of the second private plan OR Sample Adult's second private plan covers others or don't know/refused if it covers others FLAG
INSPRI2_FLG4_A	Sample Child respondent provided a name for the second private plan FLAG
INSPRI2_FLG4_C	Sample Adult provided a name for the second private plan FLAG
INSPRI2_FLG5_A	The source of and who pays for the Sample Child's coverage are not refused or don't know for the second plan FLAG
INSPRI2_FLG5_C	The source of and who pays for the Sample Adult's coverage are not refused or don't know for the second plan FLAG
JOB2_FLG	JOB section flag 1 (JOBWRKSICK_A,JOBMISS_A)
KNOAVAIL_Count	Count of people available for selection at KNOAVAIL_C
LNO_HHRESP	Line number of Household Respondent
LNO_SCRESP	Line number of Sample Child respondent
MAR_FLG_A	Sample Adult MAR marital status flag (where we know which of the five legal marital status groups the adult ultimately falls into or the marital status of the adult's spouse/partner)
NATO_FINAL	Final storage variable for National Origin
NONFOST_FINAL	Final non-foster parents
OUTCOME	Outcome
PAR_FLG_C	Sample Child PAR marital status flag
PARENTAGE	{Value of AGE}
PARENTNAME	{Value of ALIAS}
PARENTS	Stores line numbers of people selected at WHOPAR or WHOFOST
PARENTS_FINAL	Final parents
PCNT	Count of all non-deleted household members
PCNT_A	Count of persons in Sample Adult family
PCNT_C	Count of persons in Sample Child family
PCNT_EligibleKNOWSC	Number of people eligible to be selected at KNOWSC
PCNT16PLUS	Count of persons 16 or older
PCNT16PLUSNOSC	Count of persons 16 or older minus the sample child
PCNT18PLUS	Count of persons 18 or older
PCNT66UP_A	Count of persons age 66+ in Sample Adult family

PCNT66UP_C	Count of persons age 66+ in Sample Child family
PCNTAGEAF	Count of persons eligible for Armed Forces question
PCNTC05_A	Count of children ages 0-5 in Sample Adult family
PCNTC05_C	Count of children ages 0-5 in Sample Child family
PCNTC517_A	Count of children ages 5-17 in Sample Adult family
PCNTC517_C	Count of children ages 5-17 in Sample Child family
PCNTEligibleSA	Count of all persons eligible to be the Sample Adult
PCNTEligibleSC	Count of all persons eligible to be the Sample Child
PCNTF1255_A	Count of females ages 12-55 in Sample Adult family
PCNTF1255_C	Count of females ages 12-55 in Sample Child family
PCNTFX_SA_AfterREL	Count of the number of people that are in the SA's family in FX_REL array (including SA)
PCNTUNDER18	Count of persons under 18 in HH
procSetFAMILY_FLGs	Procedure to set FAMILYA_FLG and FAMILYC_FLG
procSetFX_RELATE_SA	Procedure to set FX_RELATESA
PX_A	Line number of Sample Adult
PX_C	Line number of Sample Child
RACE_FINAL	Final storage variable for Race
RACE_VRBAT_FINAL	Final storage variable for other race verbatim
SAMEFAM_FLG	Sample Adult/Sample Child same family flag
SARESPSC_FLG	Sample Adult is Sample Child respondent
SASCSELECTION	Sample Adult and Sample Child random selection
SELECT_SA	Allows selection of Sample Adult for training cases
SELECT_SC	Allows selection of Sample Child for training cases
SEX_FINAL	Final storage variable for SEX
SMKERR1_CALC_A	Calculation of respondent's age when quit smoking
SMKERR2_CALC_A	Calculation of age started smoking + how long since quit smoking
SURVTYPE	Survey type
tblFEM_A	Adult Family Employment Table
tblFEM_C	Child Family Employment Table
tblPARBORN	Nativity of residential parents
tblPARREL	relationship status of child to non-foster residential parents
tblRELATE_SA	Relationship to Sample Adult
tblRELATE_SC	Relationship to Sample Child
THANKS_CB	Thanks - Will Call Back
THANKS_INSUF	Thanks for Your Time
THANKS_SUF	Thanks for Your Cooperation
TLNO_FAM_DRM	Line number of telephone number selected at PHONE_CONTACT for the Sample Adult living in on-campus housing

TLNO_TEL_SA	Line number of telephone number selected at PHONE_CONTACT for the Sample Adult
WHOREADLTR	Read the mailed advance letter